

# County of San Diego Community Profiles

## Communicable Disease Profile Graphs by Region

### **REGIONS:**

North Coastal

North Central

Central

South

East

North Inland

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# Acknowledgements

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**We acknowledge the contributions of the following individuals for their work in the preparation of this document:**

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**Thank you to the following individuals for their leadership and support in making this project possible:**

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# **INTRODUCTION**

## **Introduction**

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### **Community Health Statistics**

The Community Health Statistics unit was created to provide a means of sharing information about the health behaviors, diseases, injuries, and demographic characteristics of specific populations in San Diego County. This unit aims to supply health professionals with community level data describing the health trends and needs of the residents of our County. Community Health Statistics also provides or refers persons to available local, state and national statistics.

### **Purpose**

This profile is a compilation of information made available to the public health community and public policy-makers to better understand and manage the health and well-being of the residents of our County.

The purpose of this profile is to provide detailed information about the health and characteristics of the people living in San Diego County. It is designed to help the Health and Human Services Agency staff in each of the Health and Human Services Regions (Regions) identify problems and priority needs within their communities.

### **Regional Data**

Please see [Important Information](#) in the data guide section for explanation of geographic boundaries as well as information on methods used here, age adjusted rates, and notes on comparing data.

### **Navigating the Document**

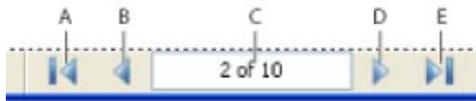
This PDF document is intended for electronic viewing, online or downloaded to your computer; this allows full navigation ability to jump through the document. This document is updated periodically throughout the year. Using the online version will preserve the links and full navigation ability as well as ensure the most recent version of the document is being used.

**Use links** to jump to a section or page from a list

The Table of Contents (page 4) has many links to quickly jump to the specific section of interest. Within the document, some title pages have lists that are linked to quickly jump to a topic within a section. These links are not underlined, but can be identified when the hand icon (  ) turns into a pointing hand (  ) when hovering over an item.

There are also links outside the document for more information on a subject. These are underlined and require internet access. They may be identified by the pointing hand with a “w” for web access.

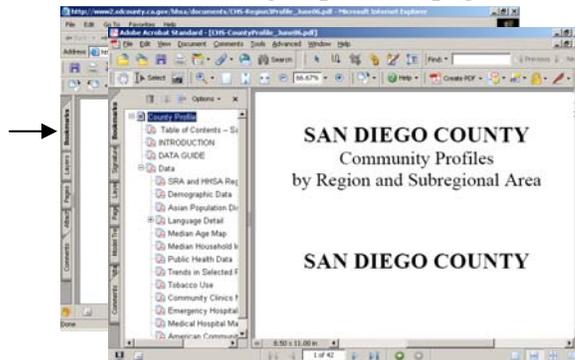
**Use the navigation bar** at the bottom of the window to move through a document:



- A- go to 1<sup>st</sup> page
- B- go back one page
- C- enter a page number to go to
- D- go forward one page
- E- go to last page

**Use bookmarks** to jump to a section

This is a built-in table of contents that is viewed to the side of the document and can be left open while viewing the document. To access this, click on the bookmarks tab on the left side of window. Use the (+) or (-) symbols to expand or collapse the list. Click on a bookmark to jump to that page.



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# **DATA GUIDE**

## Important Information for Data Users

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### Please Review This Section Before Using the Following Public Health Data

For abbreviations used in data sources, see [Data Sources](#).

#### Diagnoses:

Disease definitions for most indicators are based on ICD-CM coding. Two versions of ICD coding are used in this document depending upon the data source, ICD-9 or ICD-10. ICD-CM based data for San Diego is comparable whether obtained using the 9<sup>th</sup> or 10<sup>th</sup> revision; codes used are listed in footnotes for appropriate tables. Healthy People 2010, USA, California data are shown if available and comparable to local data.

The death data used in this document only include underlying cause of death. That means that deaths are categorized only by the disease or injury that initiated the chain of events leading to death and not by the immediate cause or any other contributing causes. For example, a diabetic who died of heart disease resulting from complications of diabetes would only be included among diabetes-related deaths. Similarly, Hospital Discharge and Emergency Department Discharge data is reported by the primary diagnosis at time of discharge for which the medical encounter occurred. In some cases, indicators are based on case definitions; meeting specified clinical and/or laboratory criteria not ICD-CM coding.

#### Comparing Data:

Caution must be used when exploring data from multiple sources or even the same data prepared by different analysts; comparisons may not be appropriate. Attention to accompanying information is important in order to note differences including, but not limited to: data sources, data preparation, diagnosis/case definitions, rate constant (i.e. per 100,000 or 1,000), geographic units, persons included in the data (i.e. location of occurrence vs. location of residence, or among live births not total pregnancies).

Data from different tables must not be modified (i.e. aggregated or subtracted). For example, pedestrian deaths can not be added to nonfatal pedestrian injuries to determine total injuries. In this case, one database is recorded by location of residence, while the other is by location of occurrence. If you need assistance or additional data not contained here, please contact the Community Health Statistics unit.

#### Geography: Understanding Geographic Units used in Health Data

Many different geographic units are used throughout San Diego County. In this document, boundaries for Regions and Subregional Areas (SRA) used here are based on census tracts and approximate Health and Human Service Agency Region (HHSA

Region) boundaries which are based on zip codes. The exception to this is California Health Interview Survey (CHIS) data, which use zip code based HHS Regions.

Many data users have expressed the desire for community level data, beyond the HHS Region (which are large aggregations of zip codes). Several levels of geography may be considered, such as, Subregional Area, Census Tract, Zip Code, or City. In order to provide community level health data and compare populations, it is important to have stable geographic units and units that are compatible with population data estimates.

While most health data is reported by zip code, zip codes may change at any time throughout the year – making annual aggregated estimates difficult. Additionally, since zip codes may change from one year to the next, comparing zip code data over time may introduce a level of imprecision. Subregional Areas (SRAs) are small, community level geographic units based on census tracts which are stable between census years (i.e. change only every 10 years, if at all). Population estimates are available at this level with high level of accuracy. However, health data for an SRA must be estimated based on reported zip code data.

**Types of data available for Geographic Boundaries**

<b>Zip Codes:</b>	<b>Census Tracts:</b>
HHS Region	Subregional Area (SRA)
Health Services	Major Statistical Area (MSA)
	Region (approximated HHS Region)

In this document community level (SRA) data is aggregated to larger regional levels. Currently, Region aggregations based on SRAs closely approximate, but do not directly correspond to HHS Regions. In order to have more accurate community level data and enable reliable comparisons over time and place, SRA Region aggregations are used in lieu of HHS Regions. Other data preparers that provide direct HHS Region level data may differ slightly from the data presented here; however, any difference would not be expected to impact any decisions related to policy, planning, or resources for any particular area. There are 3 zip codes which are primarily affected by the differences in method of aggregation to Region or HHS Region (see table below). A list of zip codes representing each Region is included at the beginning of the Region section within each Profile, as well as a complete listing in the County Profile.

Again, the only data in this document to which the above information *does not* apply is the CHIS (California Health Interview Survey) data in the Public Health Data Section. Data in this survey is collected by HHS Region and can not be estimated for SRA based Regions.

**Methods of Aggregating Data**

<b>HHS</b>		<b>Community Profiles</b>	
<b>HHS REGION</b>	<b>Zip Code</b>	<b>Subregional Area (SRA)</b>	<b>Region</b>
North Coastal	92014	Del Mar-Mira Mesa	North Central
North Coastal	92091	North San Diego	North Inland
North Central	92131	Poway	North Inland

**Rates, Age Adjusted Rates: Understanding Rates and Age Adjusted Rates**

The public health data in the Community Profiles includes crude rates (from this point forward referred to as rates) for Regional and Subregional (SRA) level data. Additionally, age adjusted rates are provided for County level data in many cases.

For comparison, Healthy People 2010 Targets are included, along with comparable USA and California rates. Many Healthy People 2010 Targets are based on age adjusted rates; these are indicated by “age adjusted population”. When a Healthy People target listed is based on an age adjusted rate, the comparable rates for USA and California are also age adjusted.

A rate is the number of cases divided by the population, usually multiplied by a constant. For example 987 cases, divided by population of 654,321 would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.

Calculations of age adjusted rates are slightly more complex. They take into account the age of each case relative to a standard age distribution of a reference population. Recently a new reference population was determined referred to as “2000 US standard population”, previously used was a reference population from 1940. The 2000 US standard population proportions more closely reflect the current age distribution of the entire US population.

Age adjusted rates represent the rates that would be expected if a population of interest had the same age distribution as the standard population. This removes the effect of age when comparing rates to identify risk in a population. This is important in many cases when comparing risk “across populations with different underlying age structures”<sup>1</sup>.

Since many causes of mortality disproportionately affect older persons, disease mortality is often reported as age adjusted rates. This is the case with many Healthy People 2010 Targets, particularly death rates.

Age adjusted rates are used to compare relative risk (over time or between populations), while removing the effect of differences in the age of a population. Age-adjusting shows differences between groups that are not due to differences in age distribution. “Age adjusted rates should be viewed as relative indexes rather than as direct or actual measures” of risk<sup>1</sup>.

For many users of this data the magnitude of an issue is important, not only the risk outside of age. Often planning and resource needs are based on data. In this case, knowing that a group contains an older population is valid & important for planning for those diseases which affect different aged population sectors.

Additionally, differences may be due to other reasons besides age, such as gender or race/ethnicity. One may want to consider several of these demographic factors when

examining a health issue. Each Profile contains demographic data for each Region and SRA, including: age, gender, race/ethnicity distributions, income, occupation, housing and education data. Many of these factors have been implicated at the roots of health disparities.

1: <http://wonder.cdc.gov/wonder/help/ucd.html>

## Data Sources

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Health and demographic data are available from a variety of sources, represented by three different categories of data. Population data, such as the census, is collected from the entire population. Sample or survey data are collected from a portion of the population, and extrapolated to represent the entire population. Administrative data are collected based on an organization's day-to-day operations, such as the prehospital database. The following data sources were used in the preparation of this report.

*American Community Survey (ACS):* ACS is a new nationwide survey designed to provide communities a fresh look at how they are changing. It is intended to eliminate the need for the long form in the 2010 Census. The ACS collects information from U.S. households similar to what was collected on the Census 2000 long form, such as income, commute time to work, home value, veteran status, and other important data. Information is available by county.

*Emergency Department Data (ED Data):* ED data is collected and maintained for most emergency hospitals in San Diego County. ED data elements include patient's home zip code, demographic information, source of payment, disposition, diagnoses and procedures performed for all patients treated and discharged from the ED.

*HIV/AIDS Reporting System (HARS):* HARS is used to report HIV and AIDS cases in San Diego County. HIV reporting began recently (July 2002), has not been evaluated and therefore is not available for zip code level analysis. The number of AIDS cases is available by zip code if the total is 5 or more.

*Hospital Discharge Data:* Discharge data is collected and maintained for most inpatient facilities in San Diego County. Discharge data elements include patient's home zip code, demographic information, source of payment, disposition, diagnoses and procedures performed for all patients admitted to the hospital for any condition.

*Medical Examiner's Data:* EMS receives an Investigative Summary and Autopsy for every individual who dies in San Diego County from a traumatic injury. Medical Examiner's Records contain injury related information including date and time of injury, incident location, patient home zip code, external cause of injury (ICD9 CM E code), age, sex, race/ethnicity, vehicle make and type, law enforcement agency and report number, mechanism of injury and detailed narrative of injuries sustained.

*Prehospital Database:* EMS receives a prehospital patient record (PPR) for every patient seen by a paramedic or emergency medical technician from 911 calls. The PPR contains information including demographics, incident zip code location, chief complaint, patient status, injury event information, restraint use, contributing factors, times and outcomes. At this time, only those calls in which paramedic or EMT made contact with a MICN at a base hospital are included in this data.

*San Diego Association of Governments (SANDAG):* SANDAG creates and maintains a tremendous quantity of demographic, economic, land use, transportation and criminal justice information about the San Diego region. Demographic data includes population characteristics like age, education, and employment. SANDAG develops annual demographic estimates and long range forecasts in addition to maintaining census data files. Data is available by County, SRA, zip code, and census tract.

*STD Morbidity Surveillance Data:* Data is available for three STDs: Chlamydia, gonorrhea and syphilis (primary and secondary). Information on age, gender, race/ethnicity are available for all 3 diseases. Data is also available at the zip code level, although this data is incomplete.

*Statewide Integrated Traffic Record System (SWITRS):* SWITRS is traffic collision data collected by the California Highway Patrol. Collisions with personal injury on public roads are included. Detailed information on the circumstances of the crash, drivers, passengers, and other victims are available by incident zip code.

*Trauma Registry:* EMS receives a Trauma Registry for every trauma patient admitted to any of the designated trauma center hospitals who meets one or more of the following criteria: length of hospitalization of 24 hours or more, death due to traumatic injuries, or transfer to or from another acute care hospital.

*Vital Records Data:* A birth certificate is required for every live birth in San Diego County; a death certificate is completed for every person who dies in San Diego County. Vital records data includes information on birth (e.g. weight) or death (e.g. underlying and contributing causes of death) and basic demographic information by zip code.

Additional abbreviations used in sources:

CA DPH – State of California, Department of Public Health

CDC – Centers for Disease Control and Prevention

CHIP – Community Health Improvement Partners

HASD & IC – Hospital Association of San Diego & Imperial Counties

NCHS – National Center for Health Statistics

NVSS- National Vital Statistics System

OSHPD – California Office of Statewide Health Planning and Development

# **GLOSSARY:**

## **Health Indicator Terms**

## Glossary of Health Indicator Terms

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The following are definitions of health indicator terms for population and service data used in this document, including which databases data comes from (noted in italics). For more information, see **Data Sources**.

Disease data here represent only principal diagnoses (or underlying cause of death) and do not include secondary diagnoses. Injury data using ICD10 coding (death) only uses underlying cause of death; injury data using Ecodes from Emergency Department and Hospital discharges include only primary Ecode (mechanism of injury).

The majority of the data here are reported by location of residence of the subject. Non-fatal motor vehicle injury data from SWITRS is reported by location of occurrence; while motor vehicle death data (from Death Statistical Master Files) is reported by location of residence.

### Population and Service Data Definitions:

**Coronary Heart Disease:** ischemic and hypertensive heart disease, ICD9 codes 402, 410-414, 429.2; ICD10 codes I11, I20-I25. *Death, Hospital, Emergency Department.*

**Cardiac Chief Complaint:** cardiac chest pain, congestive heart failure, palpitations and STEMI (st-elevation myocardial infarction). *Prehospital (911).*

**Stroke:** cerebrovascular disease, ICD9 codes 430-438; ICD10 codes I60-I69. *Death, Hospital, Emergency Department.*

**Stroke Chief Complaint:** cardiovascular accident (cva). *Prehospital (911).*

**Diabetes:** Diabetes Mellitus, includes insulin-dependent and non insulin-dependent diabetes, ICD9 code 250; ICD10 codes E10-E14. *Death, Hospital, Emergency Department.*

**Asthma:** ICD9 code 493; ICD10 codes J45-J46. *Death, Hospital, Emergency Department.*

**Chronic Obstructive Pulmonary Disease (COPD):** ICD9 codes 490-492, 496; ICD10 codes J40-J44. *Death, Hospital, Emergency Department.*

**Respiratory-related Chief Complaint:** asthma, chronic obstructive pulmonary disease (COPD) and respiratory distress. *Prehospital (911).*

**Female Breast Cancer:** ICD10 code C50. *Death.*

**Prostate Cancer:** ICD10 code C61. *Death.*

**Cervical Cancer:** ICD10 code C53. *Death.*

**Colorectal Cancer:** cancer of the colon, rectum or anus, ICD10 codes C18-C21. *Death.*

**Lung Cancer:** cancer of the trachea, bronchus or lung, ICD10 codes C33-C34. *Death.*

**Arthritis:** ICD9 codes 95.6, 95.7, 98.5, 99.3, 136.1, 274, 277.2, 287.0, 344.6, 353.0, 354.0, 355.5, 357.1, 390, 391, 437.4, 443.0, 446, 447.6, 696.0, 710-716, 719.0, 719.2-719.9, 720-721, 725-727, 728.0- 728.3, 728.6-728.9, 729.0-729.1, 729.4. *Hospital, Emergency Department.*

**Dorsopathies:** ICD9 codes 720-724. *Hospital, Emergency Department.*

**Tuberculosis (TB):** new active cases reported to and confirmed by County Public Health Services, see [CDC clinical case definition](#). *TB Registry.*

**Chronic Hepatitis C:** cases reported by providers\* to County Public Health Services, see [CDC clinical case definition](#). *Hepatitis Reporting.*

**AIDS:** new cases reported by providers\* to County Public Health Services, cases need not be investigated and confirmed, see [CDC clinical case definition](#). *HIV/AIDS Reporting System.*

**Chlamydia:** new cases reported by providers\* to County Public Health Services, cases need not be investigated and confirmed, see [CDC clinical case definition](#). For estimated Chlamydia (Regional Tables), cases with unknown residence are statistically distributed to Regions to better estimate Regional needs. SRA Tables do not include a substantial number of cases reported in San Diego County, due to cases with unknown residence. Approximately 30%, or 2500 Chlamydia cases per year, are missing residence data. Chlamydia numbers are underestimated at the SRA level. *STD Reporting.*

**Gonorrhea:** new cases reported by providers\* to County Public Health Services, cases need not be investigated and confirmed, see [CDC clinical case definition](#). For estimated Gonorrhea, cases with unknown residence are statistically distributed to Regions to better estimate Regional needs. SRA Tables do not include a substantial number of cases reported in San Diego County, due to cases with unknown residence. Approximately 30%, or 600 gonorrhea cases per year, are missing residence data. Gonorrhea numbers are underestimated at the SRA level. *STD Reporting.*

**Primary and Secondary Syphilis:** new cases reported to and confirmed by County Public Health Services, see [CDC clinical case definition](#). *STD Reporting.*

**Live Birth:** a product of conception, which after complete expulsion or extraction from the mother, breathes or shows any other evidence of life. This is not synonymous with the term “pregnancy”, which can result in a miscarriage, fetal death, induced abortion or live birth. *MCFHS.*

**Early Prenatal Care:** Care beginning during the 1<sup>st</sup> trimester of pregnancy.

Rates (%) are calculated amongst those births whose start of prenatal care is known (i.e. those whose start of care is unknown or missing are excluded from the denominator).  
*MCFHS.*

**Preterm birth:** birth prior to 37 completed weeks of gestation. *MCFHS.*

**Low birth weight:** birth weight less than 2,500 g (approximately 5lbs, 8oz). *MCFHS.*

**Very low birth weight:** birth weight less than 1,500 g (approximately 3lbs, 5oz).  
*MCFHS.*

**Fetal mortality:** number of deaths of fetuses more than 20 weeks gestation per 1,000 live births and fetal deaths. *MCFHS.*

**Infant mortality:** number of deaths of infants under one year of age per 1,000 live births.  
*MCFHS.*

**Unintentional Injury:** ICD9 Ecodes E800-E869, E880-E929; ICD10 codes V01-X59, Y85-Y86. This generalized unintentional injury may overlap with specific indicators below, such as drowning, smoke/fire, suffocation, falls, motor vehicle or pedestrian deaths, as well as the unintentional portion of overdose/poisoning and firearm injuries.  
*Death, Hospital, Emergency Department.*

**Drowning:** Accidental drowning and submersion, including those caused by accident to watercraft or related to water-transport, ICD10 codes W65-W74, V90, V92. *Death.*

**Accidental exposure to smoke, fire or flame:** ICD10 codes X00-X09. *Death.*

**Unintentional suffocation:** ICD10 codes W75-W84. *Death.*

**Fall-related:** accidental falls, ICD9 Ecodes E800-E886, E888; ICD10 codes W00-W19.  
*Death, Hospital, Emergency Department.*

**Overdose/Poisoning:** all intents, ICD-9 Ecodes E850-E869, E950-E952, E962; ICD10 codes X40-X49, X60-X69, X85-X90, Y10-Y19, Y35.2, Y40-59, Y60-69, U01.6-U01.7.  
*Death, Hospital, Emergency Department.*

**Motor Vehicle Injury:** unintentional injury of anyone involved in a motor vehicle accident (collision or non-collision) on a public road, including occupants, pedestrians, and cyclists, ICD9 codes E810-819; ICD10 codes V30-V39 (.4-.9), V40-V49 (.4-.9), V50-V59 (.4-.9), V60-V69 (.4-.9), V70-V79 (.4-.9), V81.1, V82.1, V83-V86 (.0-.3), V20-V28 (.3-.9), V29 (.4-.9), V12-V14 (.3-.9), V19 (.4-.6), V02-V04 (.1, .9), V09.2, V80 (.3-.5), V87 (.0-.8), V89.2. *Death, Hospital.*

**Total Motor Vehicle Accident Injuries:** those injured in motor vehicle accidents occurring on public roads; injured may be cyclists, pedestrians or occupants of motor vehicles (such as cars, trucks, or buses). Data here is based on injuries involving a motor

vehicle in transport (in motion or readiness for motion) and is not defined by ICD codes of collision or non-collision. Data is by location of occurrence. *SWITRS*.

**Alcohol-related:** those injured in motor vehicle accidents occurring on public roads where alcohol was involved. The drinking driver need not be injured and need not be declared at fault, nor tested for being under the influence of alcohol. Data is by location of occurrence. *SWITRS*.

**Drinking Drivers:** drivers noted as drinking, involved in motor vehicle accidents occurring on public roads with injury to any party. The drinking drivers need not be injured and need not be determined to be at fault nor impaired. Data is by location of occurrence. *SWITRS*.

**Active Restraint Use:** those injured in motor vehicle accidents occurring on public roads where active restraints were used. Rates are calculated amongst those whose status of restraint use/non use was known. Data applies to those ages 6 years and older. Data is by location of occurrence. *SWITRS*.

**Child Restraint Use:** those injured in motor vehicle accidents occurring on public roads where child restraints were used. Rates are calculated amongst those whose status of restraint use/non use was known. Data applies to those ages 0-5 years. Data is by location of occurrence. *SWITRS*.

**Pedestrian injury attributed to Motor Vehicle Accidents:** unintentional injury of pedestrians involved in motor vehicle accidents on a public road, ICD9 codes E810-819(.7); ICD10 codes V02-V04 (.1, .9), V09.2. *Death, Hospital*.

**Homicide:** deaths that are intentionally inflicted by another, ICD10 codes U01-U02, X85-Y09, Y87.1. *Death*.

**Assault injury:** injuries that are intentionally inflicted by another, ICD9 codes E960-E969. *Hospital, Emergency Department*.

**Suicide:** deaths that are intentionally inflicted by self, ICD10 codes U03, X60-X84, Y87.0. *Death*.

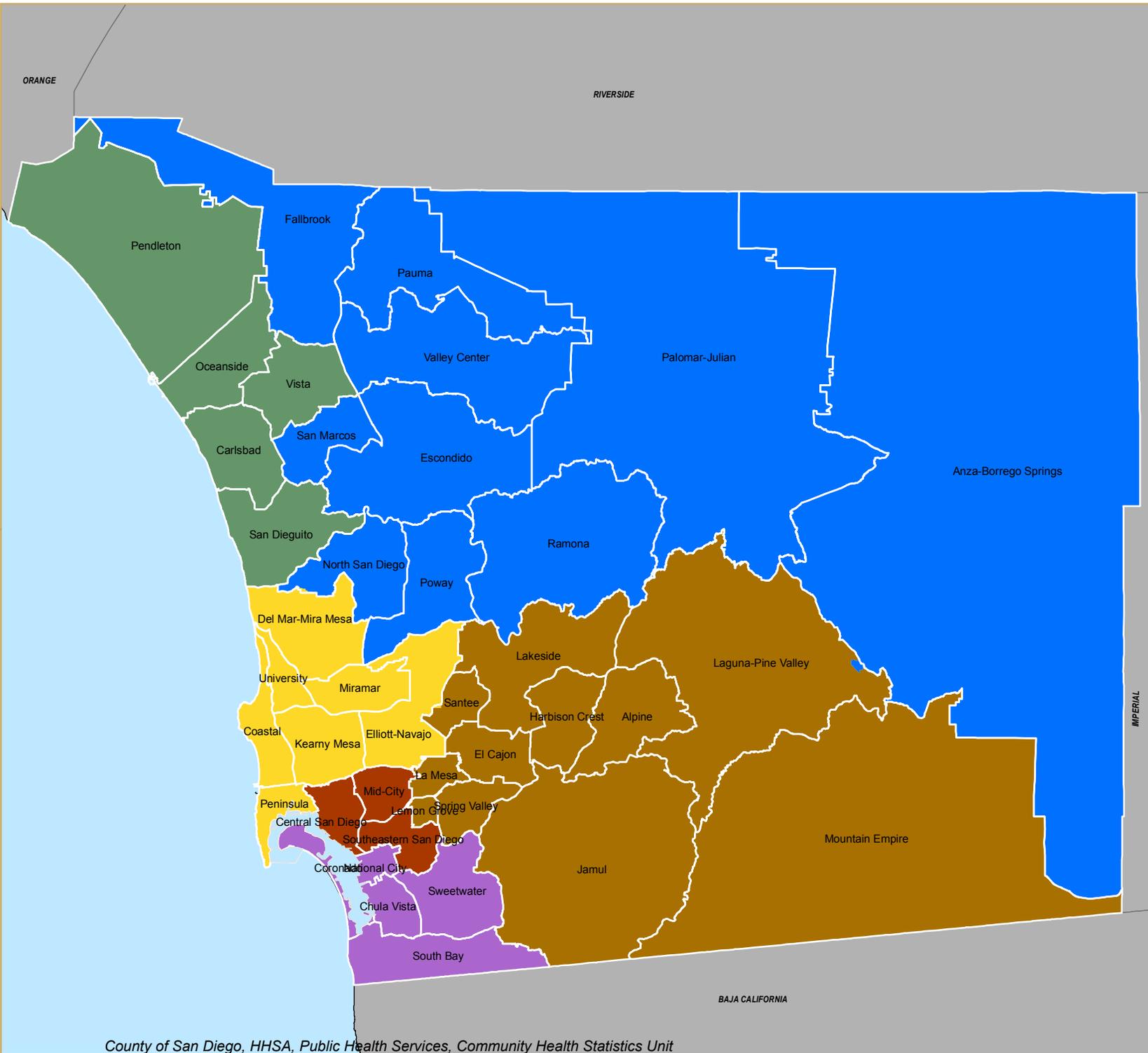
**Self-inflicted injury:** injuries that are intentionally inflicted by self, ICD9 codes E950-E959. *Hospital, Emergency Department*.

**Firearm-related:** all intents, ICD9 Ecodes E922, E955.0-E955.4, E965.0-E965.4, E970, E985.0-E985.4; ICD10 codes W32-W34, X72-X74, U01.4, X93-X95, Y22-Y24, Y35.0. *Death, Hospital, Emergency Department*.

**Dental-related:** injury as well as non-injury medical/dental primary diagnoses, ICD9 codes 521-523, 525.3, 525.9, 873.63, 873.73. *Emergency Department*.

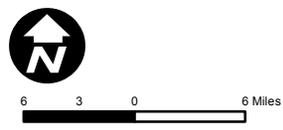
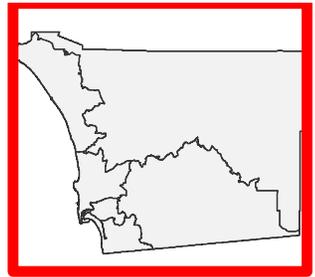
\* Providers may refer to health care providers (e.g. physicians, nurses, or hospital administrators), laboratories, or school administrators who are legally mandated to report diseases indicated in CCR, Title 17, sections 2500, 2508, and 2505.

# **SAN DIEGO COUNTY COMMUNITY PROFILE**



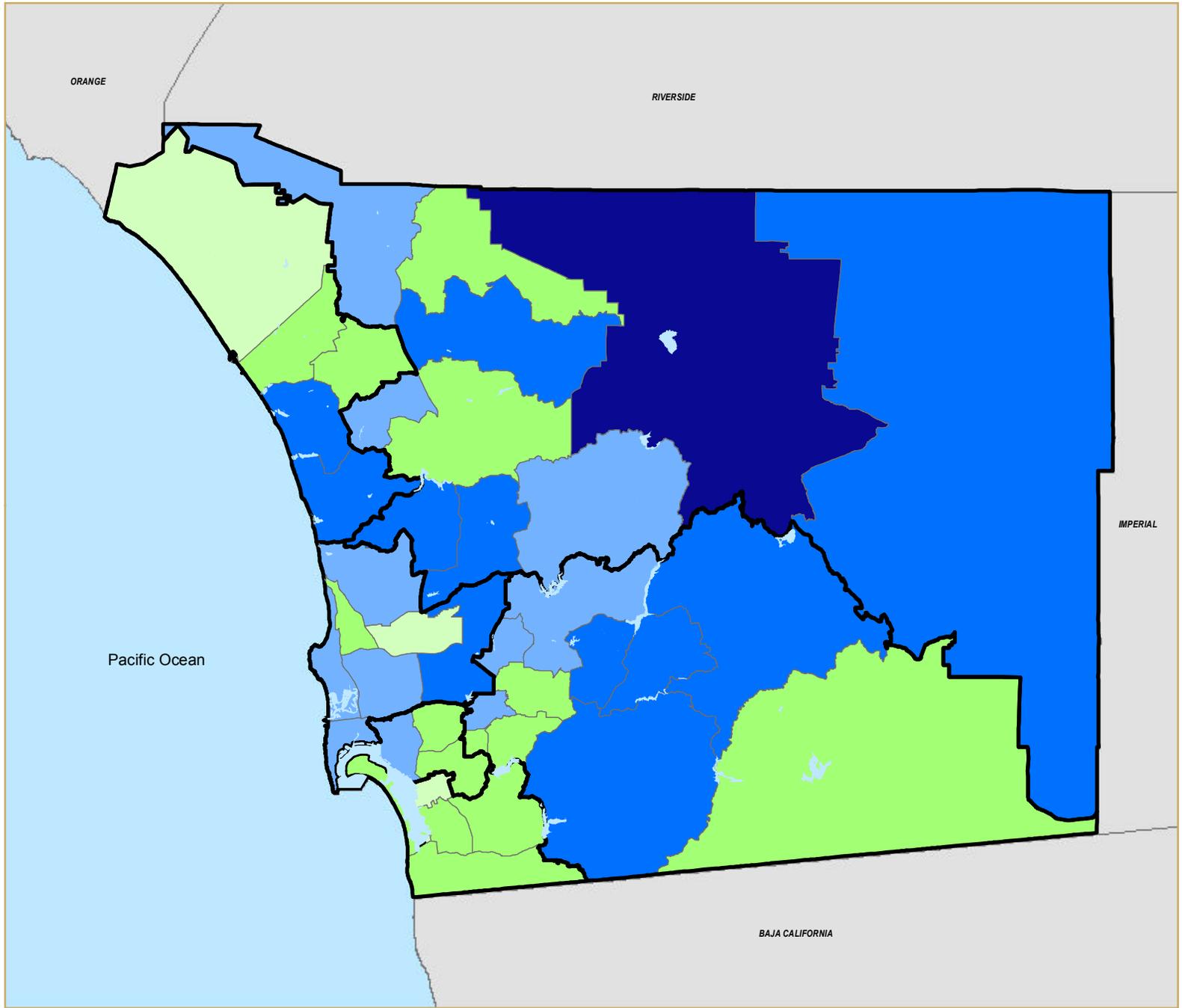
**SRA and Regional Boundaries in San Diego County**

- SRA Boundary
- Region**
- RegName**
- Central
- East
- North Central
- North Coastal
- North Inland
- South

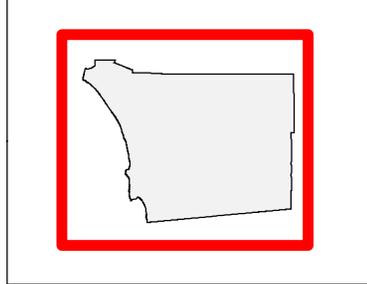
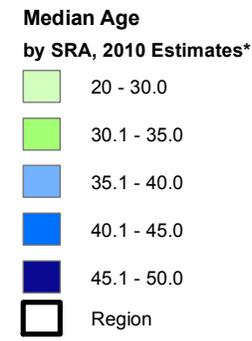


Maps Prepared by County of San Diego, HHSA, Emergency Medical Services, 619.285.6429.

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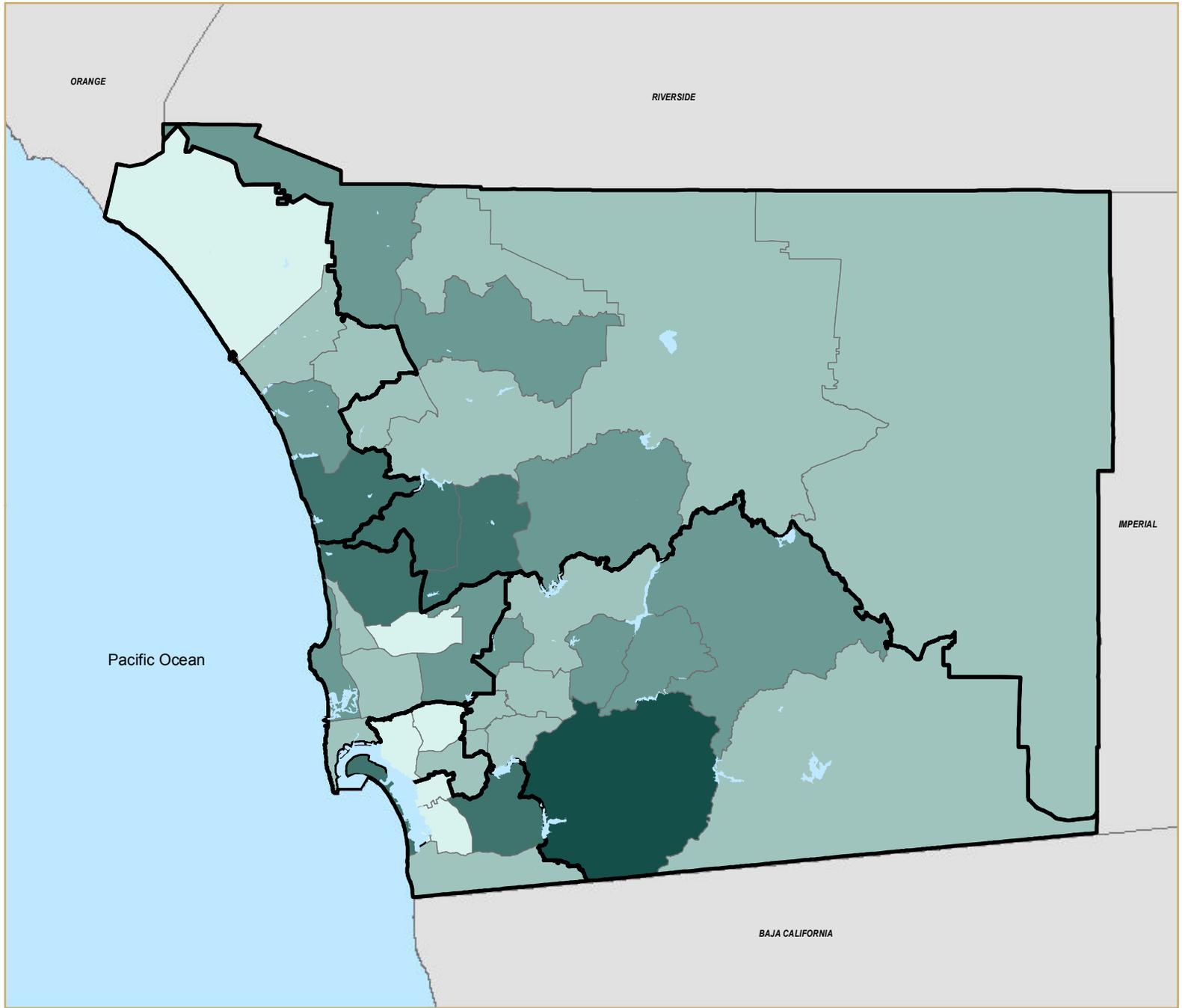


### Median Age by Subregional Area (SRA) in San Diego County

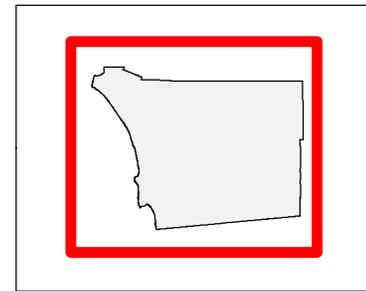
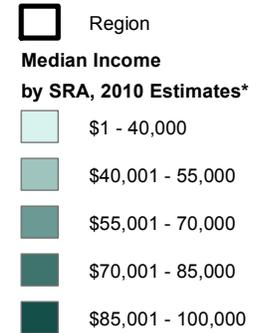


\*Data source: Demographic estimates, San Diego Assn of Governments (SANDAG). Maps Prepared by County of San Diego, HHSA, PHS, Emergency Medical Services. Contact: Isabel Corcos or Leslie Ray, 619-285-6429





### Median Income by Subregional Area (SRA) in San Diego County



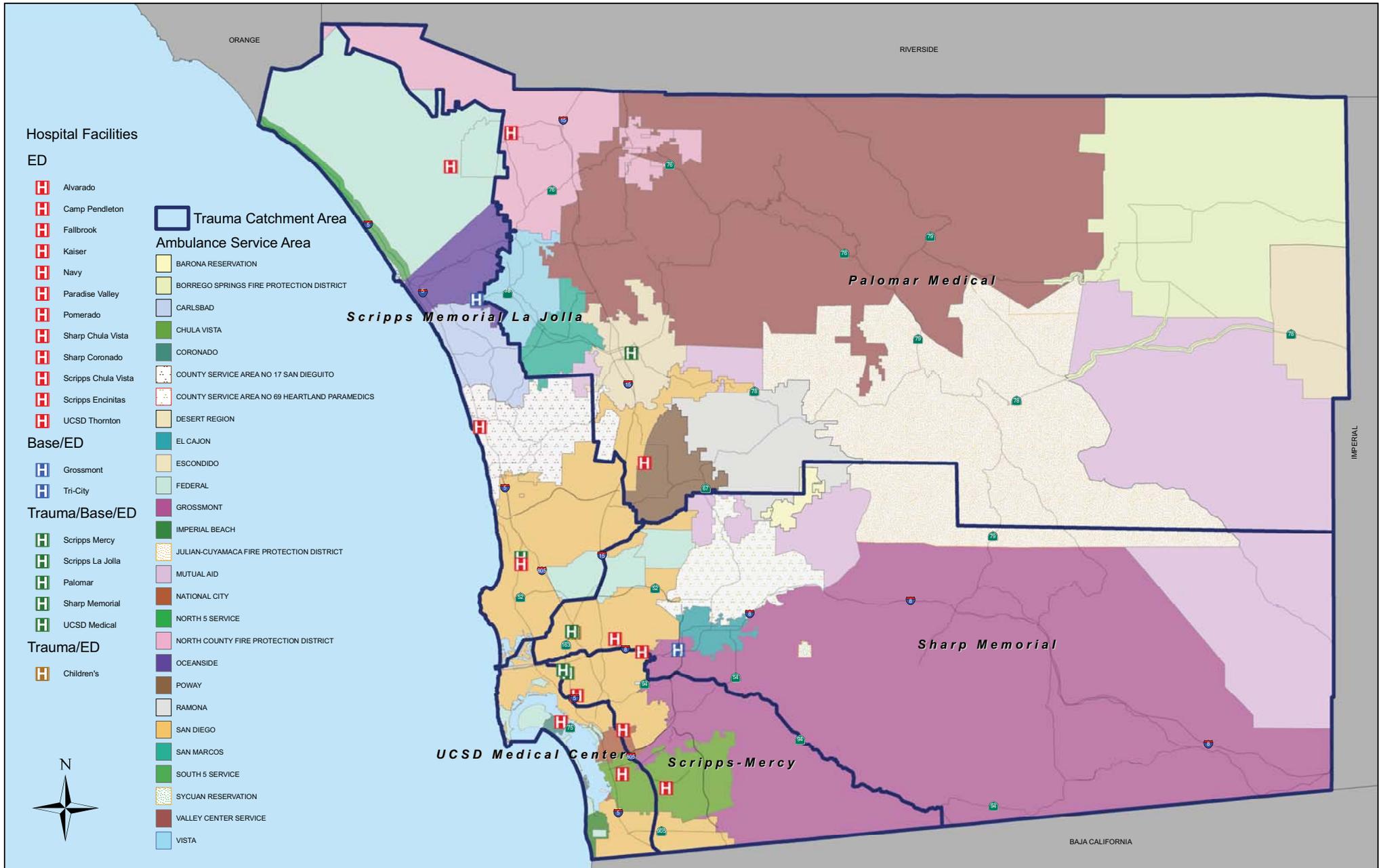
Map Date: 2011  
 Contact: Isabel Corcos or Leslie Ray,  
 County of San Diego Emergency Medical Services  
 619.285.6429

NAD\_1983\_StatePlane\_California\_VI\_FIPS\_0406\_Feet,  
 D\_North\_American\_1983\_Feet  
 Page 23 of 42

\*Data source: Demographic estimates, San Diego Assn of Governments (SANDAG). Maps Prepared by County of San Diego, HHS, PHS, Emergency Medical Services. Contact: Isabel Corcos or Leslie Ray, 619-285-6429

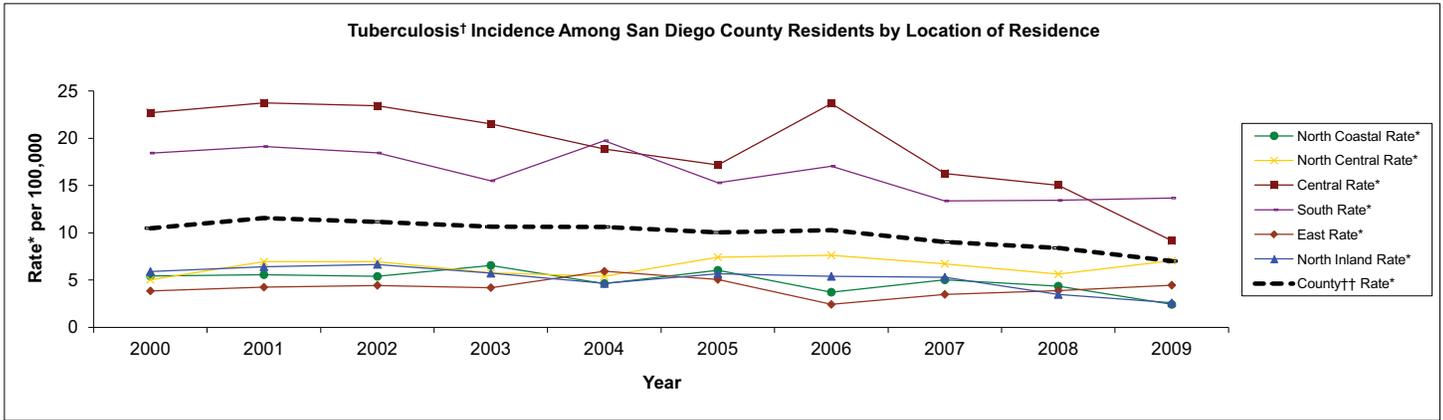
# County of San Diego Medical Resources

## Hospitals, Trauma Catchment Areas, and Ambulance Service Areas



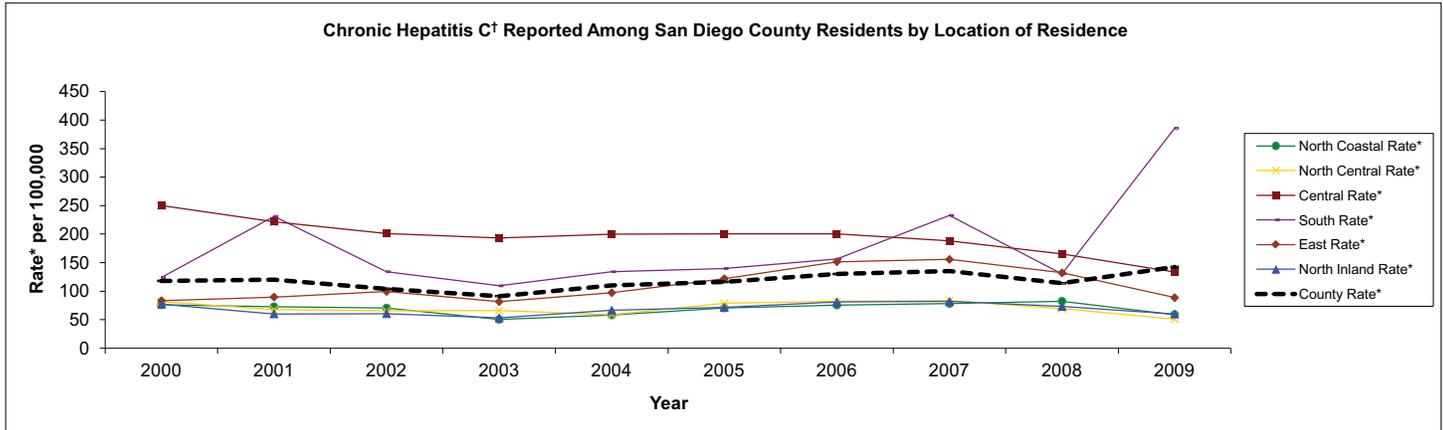
Communicable Diseases Graphs

TB Registry



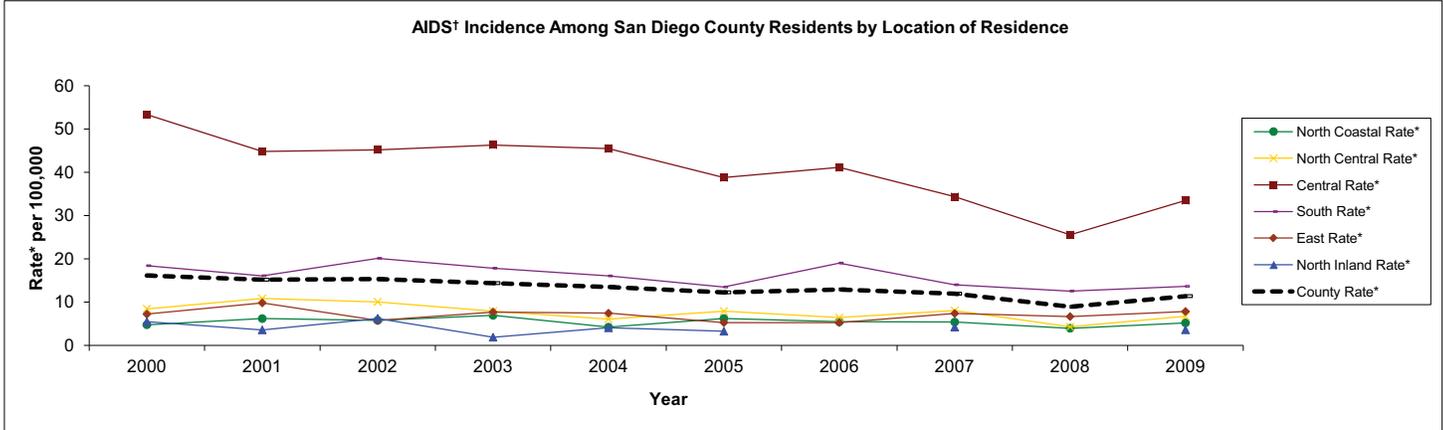
\* Rates per 100,000 population.  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 †† Total includes unknown area of residence (1 unknown in 2000).  
 § Rates not calculated for fewer than 5 events. Rates not calculated for correctional cases. (Correctional refers to patients in correctional facilities within San Diego County.)  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

Hepatitis Reporting



\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

HIV/AIDS Reporting System

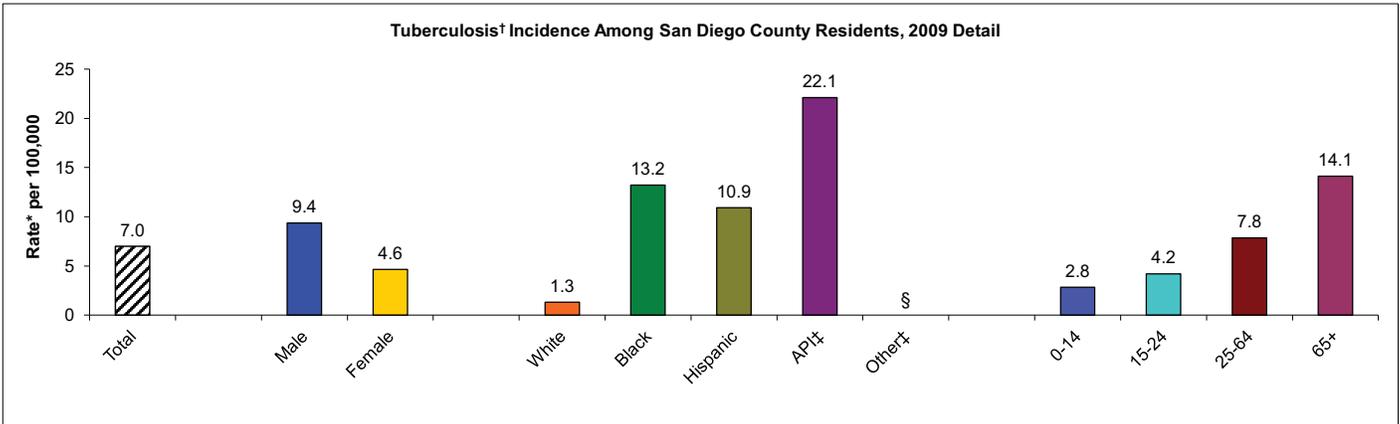


\* Rates per 100,000 population.  
 † AIDS incidence refers to new cases reported to County Public Health Services and includes those ages 13+.  
 § Rates not calculated for fewer than 20 events for AIDS. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV/AIDS Epidemiology Unit, HIV/AIDS Reporting System; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

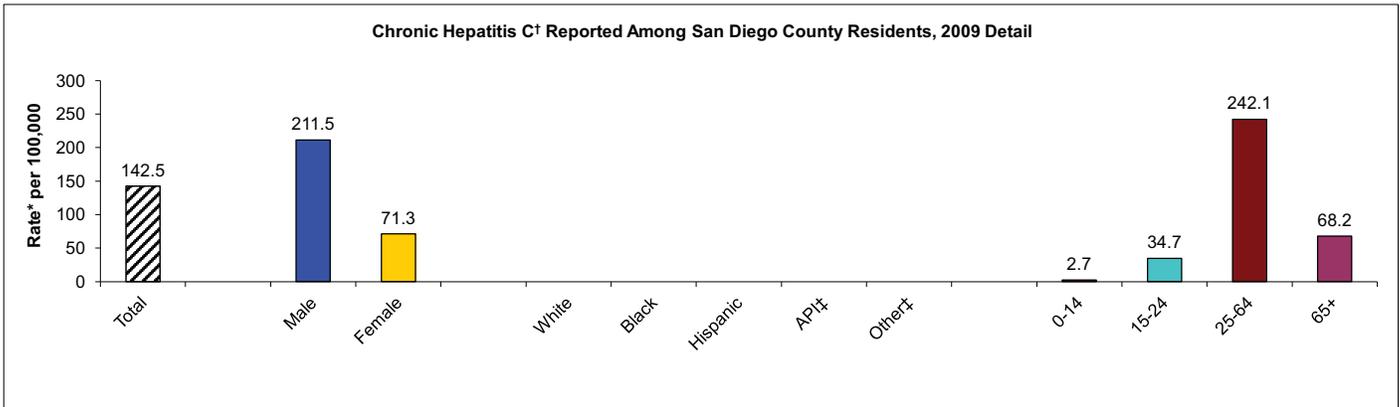
San Diego County

TB Registry



\* Rates per 100,000 population.  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events.  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting

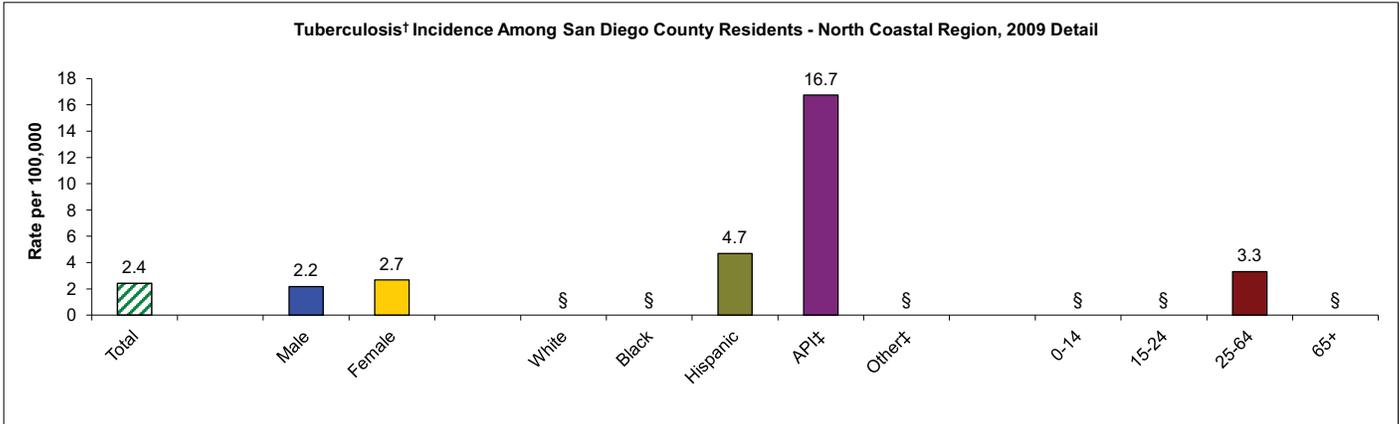


\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 ‡ Race/Ethnicity is not reported here due to limited availability of this data.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

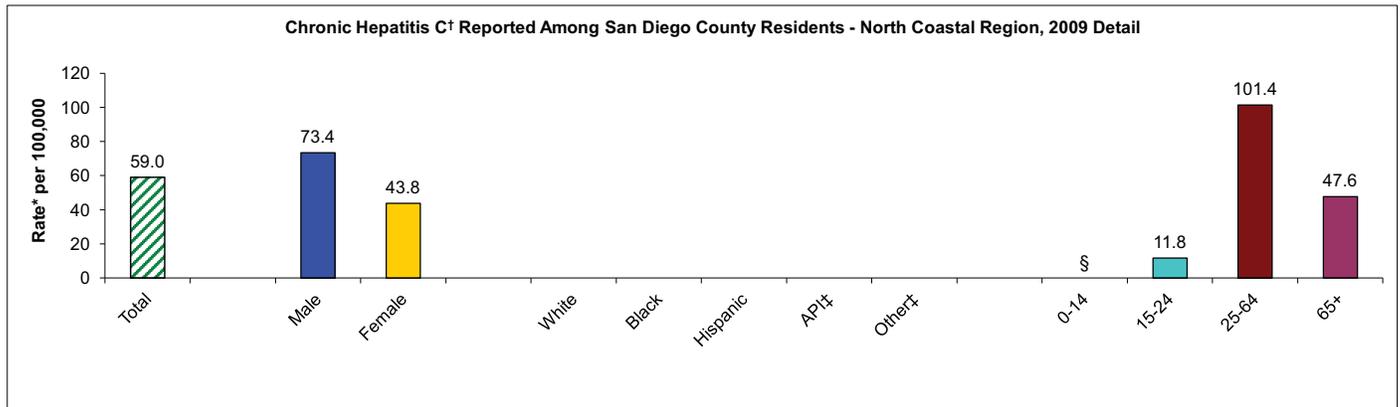
North Coastal Region

TB Registry



\* Rates per 100,000 population.  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events.  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting

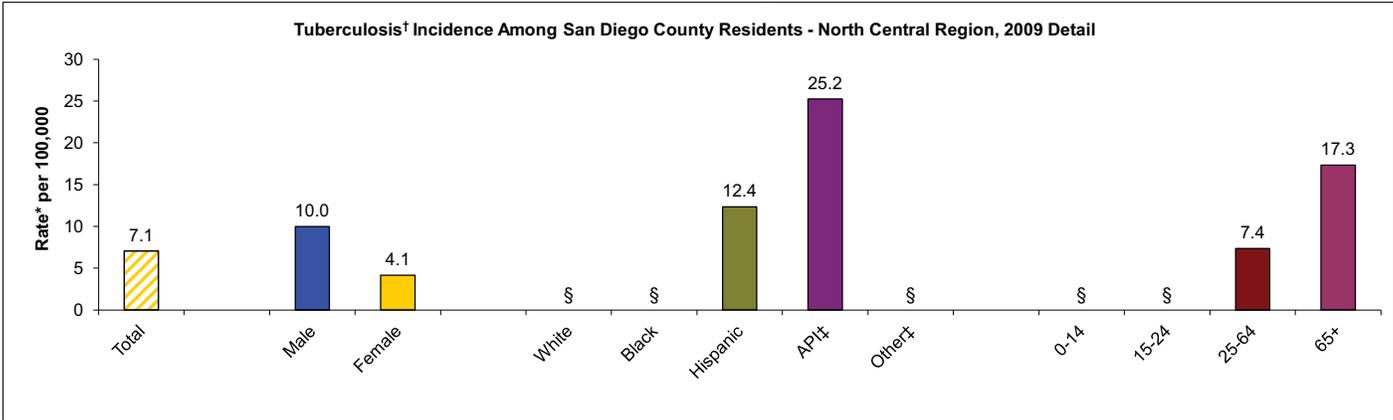


\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 ‡ Race/Ethnicity is not reported here due to limited availability of this data.  
 § API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

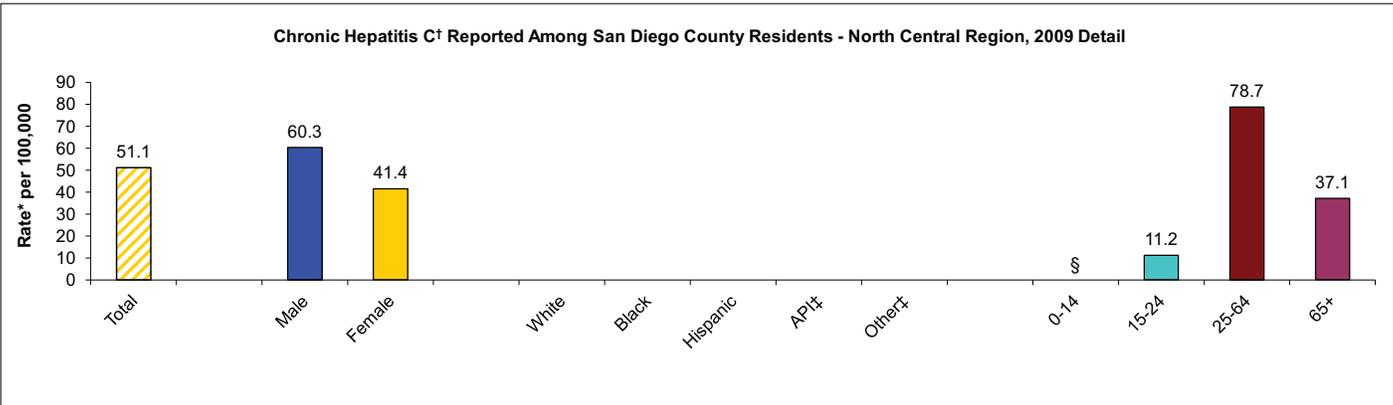
North Central Region

TB Registry



\* Rates per 100,000 population.  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events.  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting



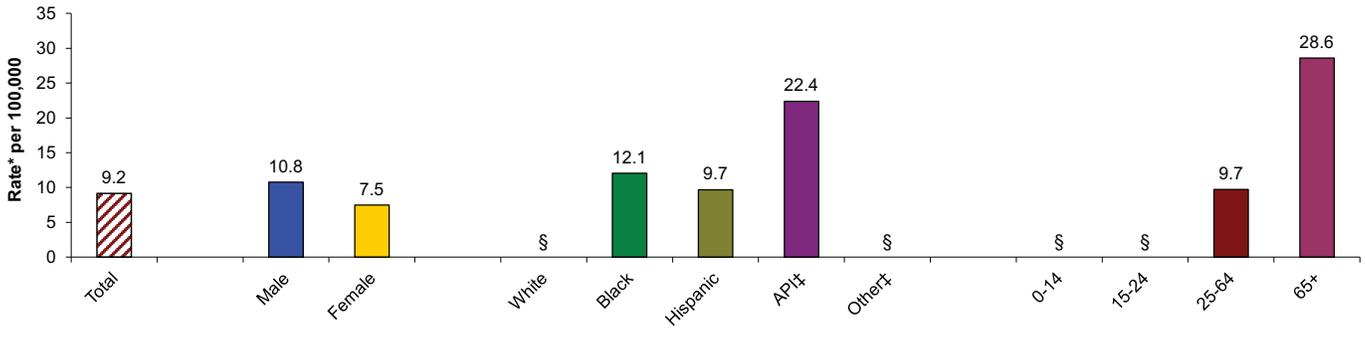
\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 ‡ Race/Ethnicity is not reported here due to limited availability of this data.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

Central Region

TB Registry

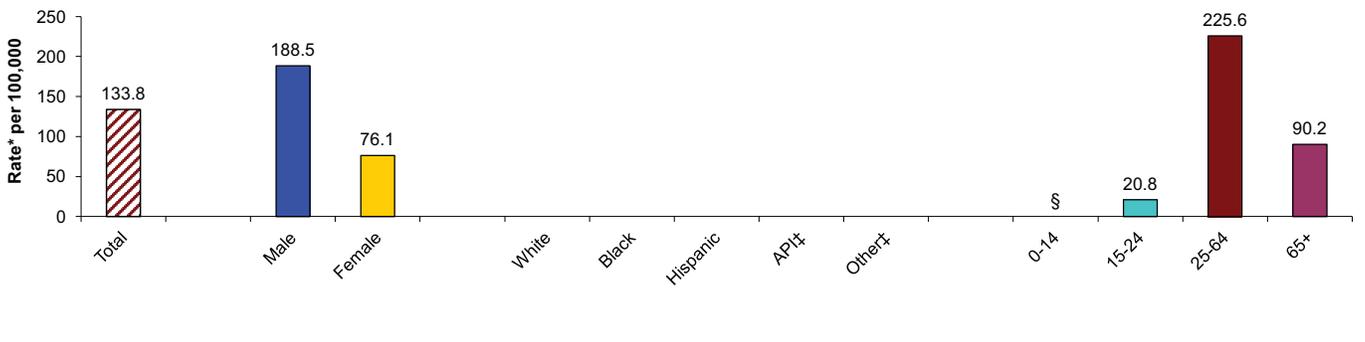
Tuberculosis† Incidence Among San Diego County Residents - Central Region, 2009 Detail



\* Rates per 100,000 population.  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events.  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting

Chronic Hepatitis C† Reported Among San Diego County Residents - Central Region, 2009 Detail



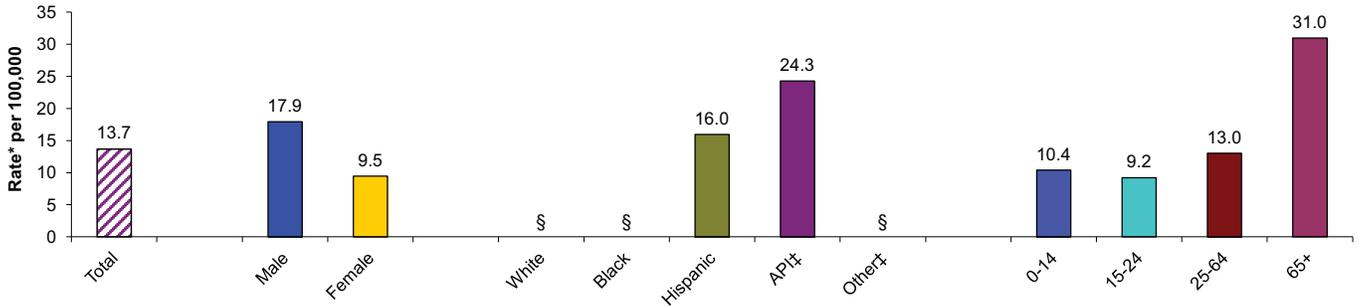
\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 ‡ Race/Ethnicity is not reported here due to limited availability of this data.  
 § API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

South Region

TB Registry

Tuberculosis† Incidence Among San Diego County Residents - South Region, 2009 Detail



\* Rates per 100,000 population.

† Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.

‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.

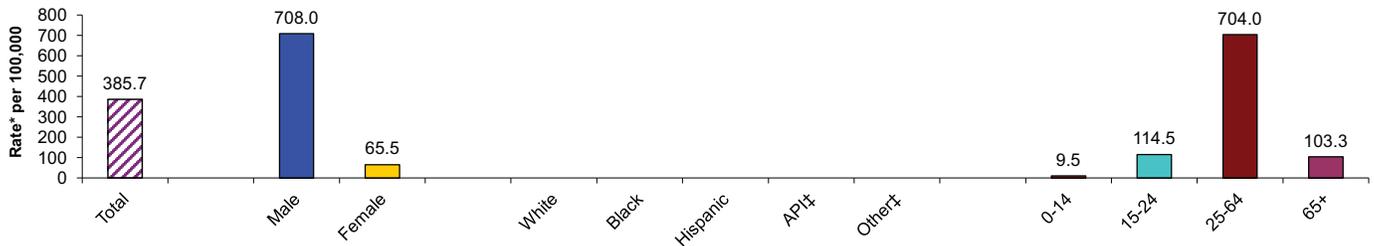
§ Rates not calculated for fewer than 5 events.

Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.

Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting

Chronic Hepatitis C† Reported Among San Diego County Residents - South Region, 2009 Detail



\* Rates per 100,000 population.

† Chronic Hepatitis C refers to cases reported to County Public Health Services.

‡ Race/Ethnicity is not reported here due to limited availability of this data.

§ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.

§ Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.

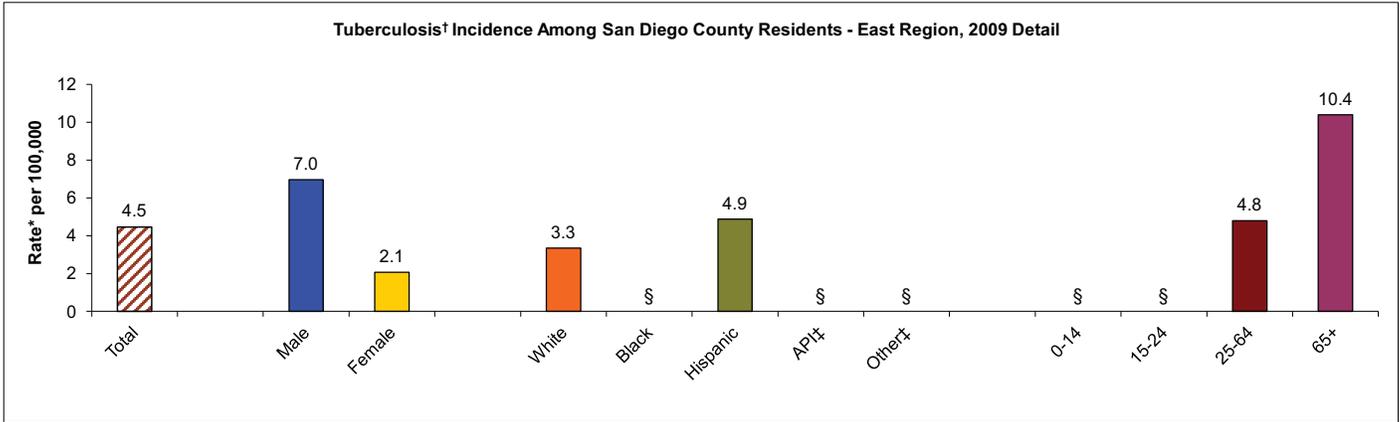
Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.

Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

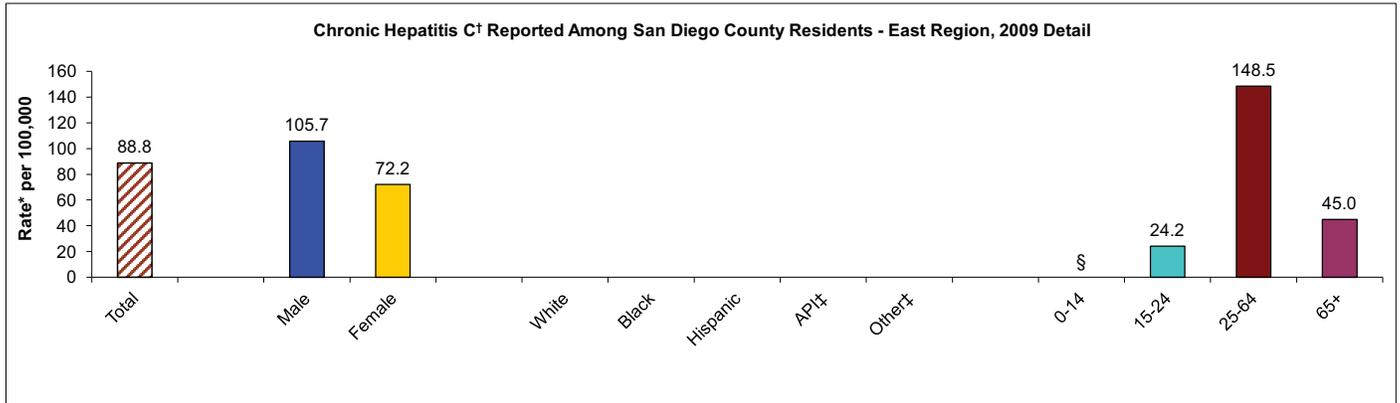
East Region

TB Registry



\* Rates per 100,000 population.  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events.  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting

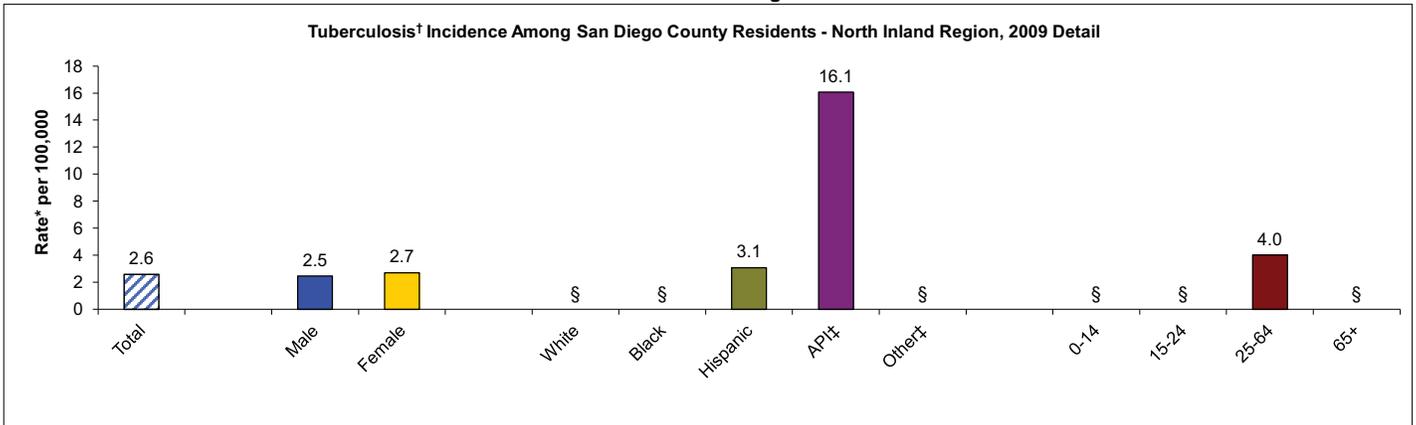


\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 ‡ Race/Ethnicity is not reported here due to limited availability of this data.  
 § API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Communicable Diseases Details Graphs

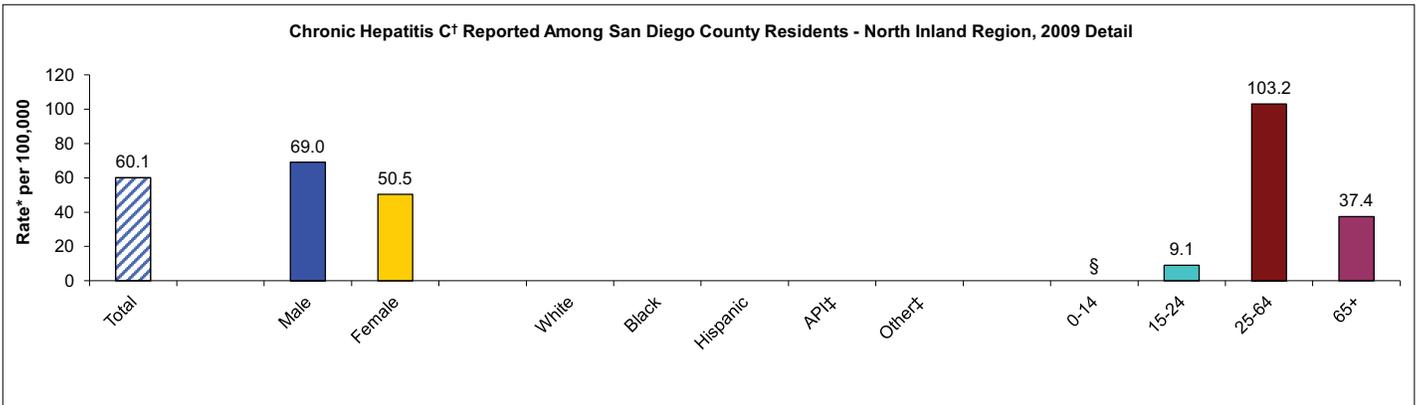
North Inland Region

TB Registry



\* Rates per 100,000 population. .  
 † Tuberculosis (TB) incidence refers to new active cases that meet CDC definition and are reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events.  
 Source: County of San Diego, Health & Human Services Agency, Tuberculosis Control Program, County TB Registry; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Hepatitis Reporting

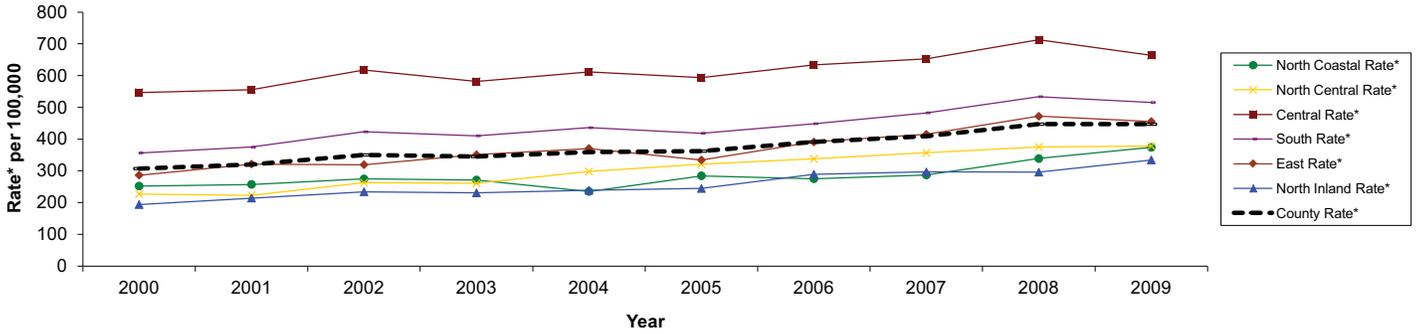


\* Rates per 100,000 population.  
 † Chronic Hepatitis C refers to cases reported to County Public Health Services.  
 ‡ Race/Ethnicity is not reported here due to limited availability of this data.  
 § API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch Branch, Communicable Disease Data; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Sexually Transmitted Diseases (STDs) Graphs

STD Reporting

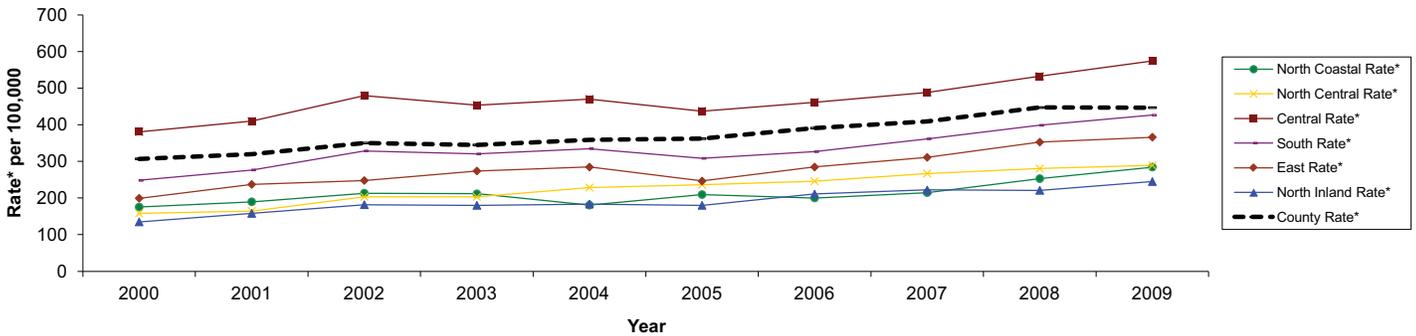
Chlamydia† Incidence, Estimated Among San Diego County Residents by Location of Residence



\* Rates per 100,000 population.  
 † Estimated Chlamydia incidence refers to new cases reported to County Public Health Services, including cases with unknown residence statistically distributed to Regions.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

STD Reporting

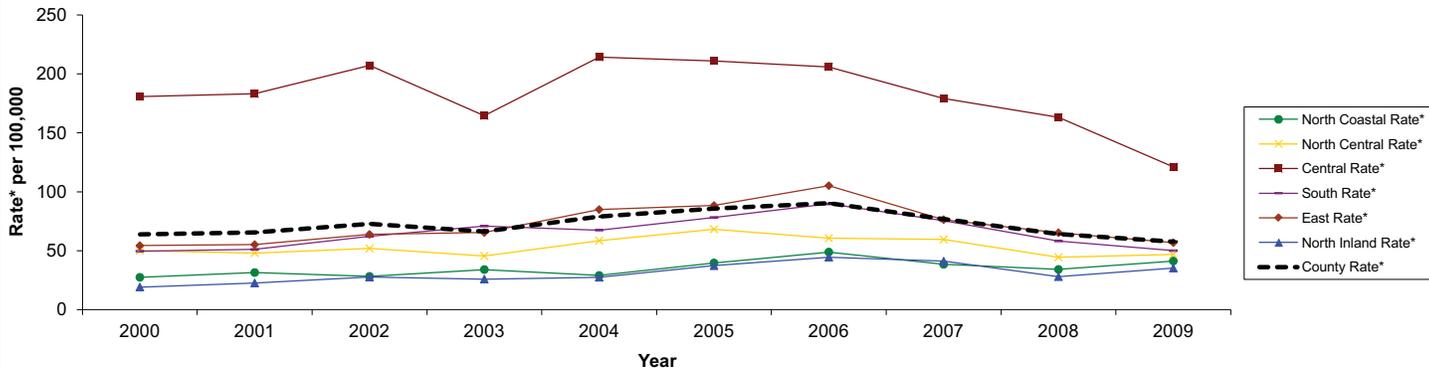
Chlamydia† Incidence Among San Diego County Residents by Location of Residence



\* Rates per 100,000 population.  
 † Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

STD Reporting

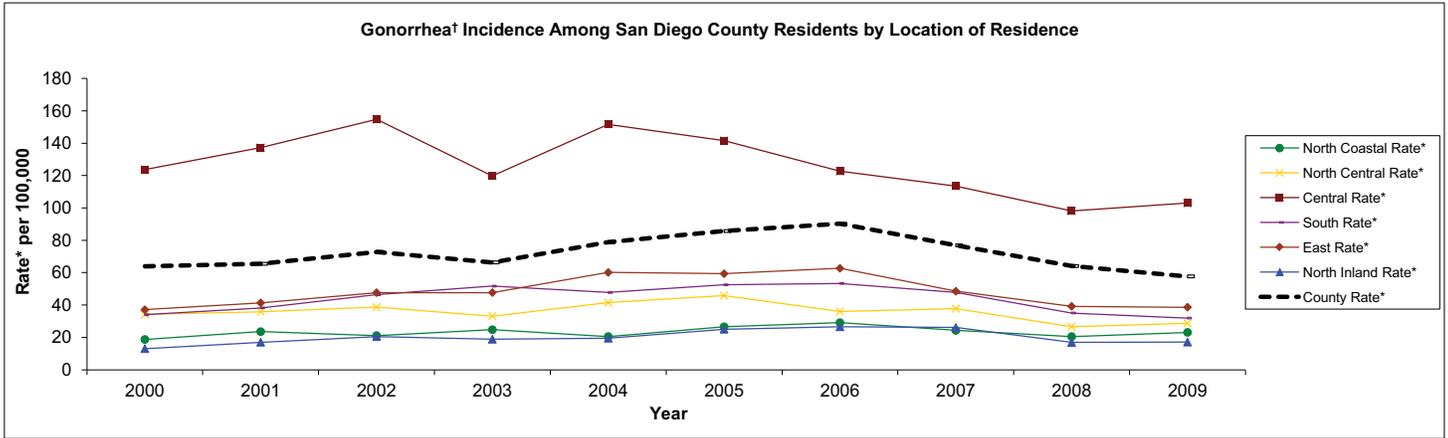
Gonorrhea† Incidence, Estimated Among San Diego County Residents by Location of Residence



\* Rates per 100,000 population.  
 † Estimated Gonorrhea incidence refers to new cases reported to County Public Health Services, including cases with unknown residence statistically distributed to Regions.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

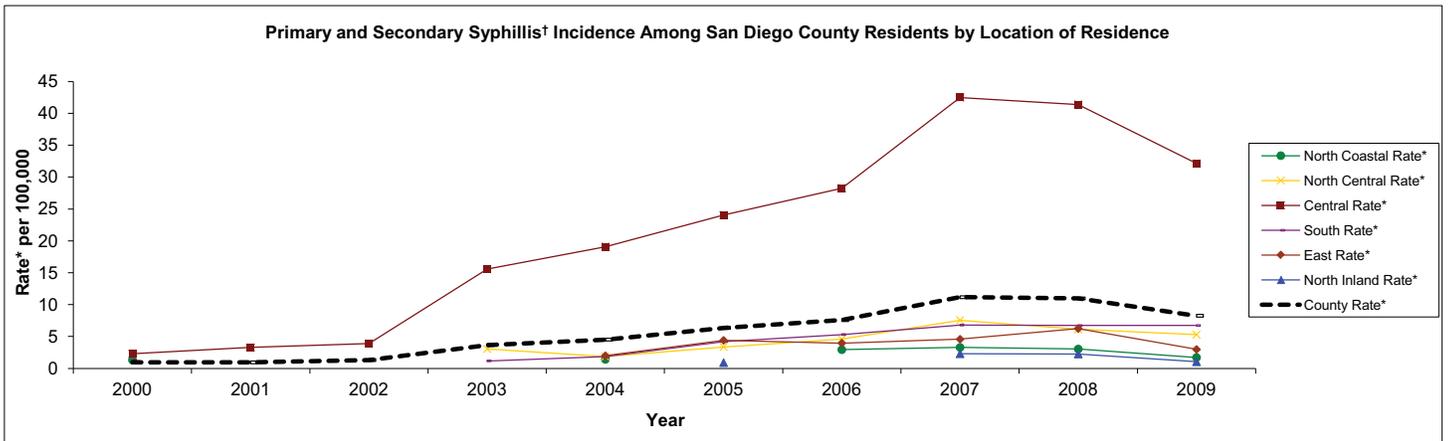
Sexually Transmitted Diseases (STDs) Graphs continued...

STD Reporting



\* Rates per 100,000 population.  
 † Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

STD Reporting

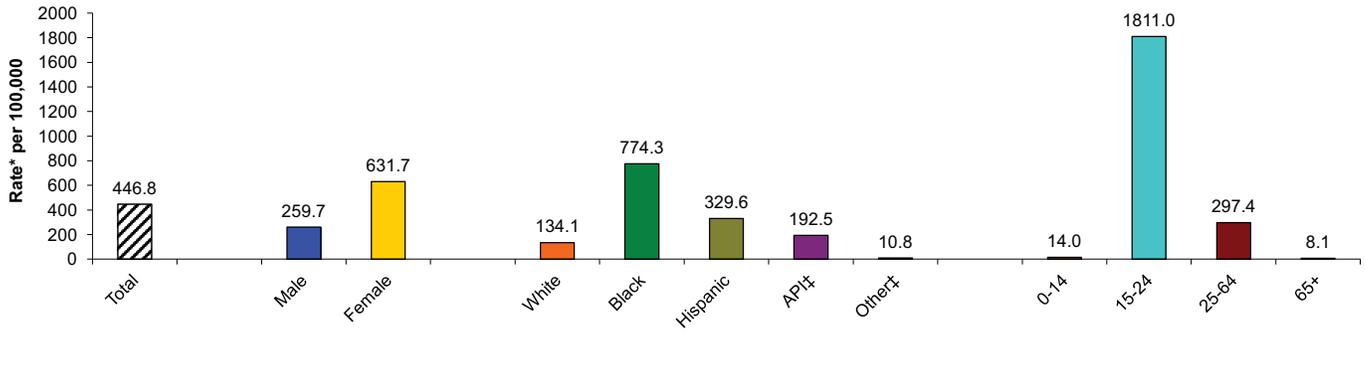


\* Rates per 100,000 population.  
 † Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

Sexually Transmitted Diseases (STDs) Details Graphs

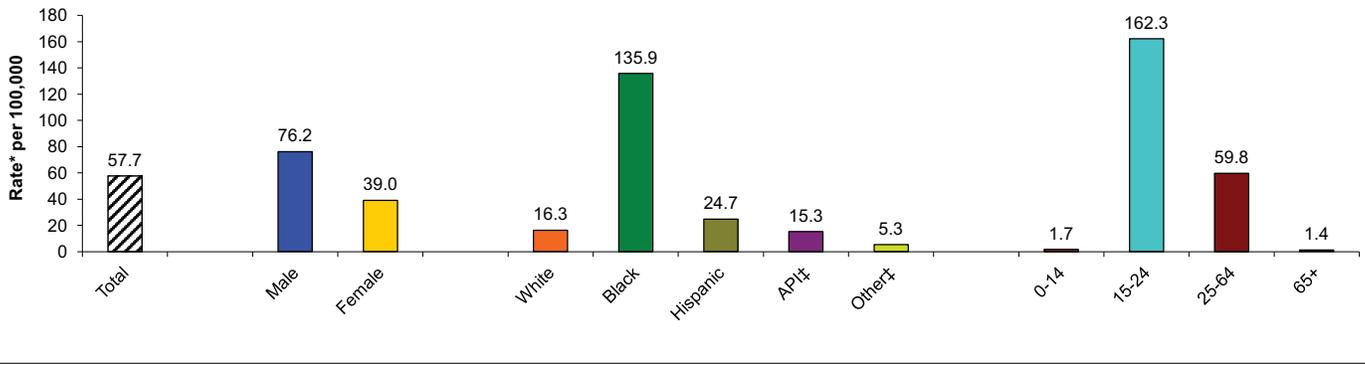
San Diego County

Chlamydia\* Incidence Among San Diego County Residents, 2009 Detail



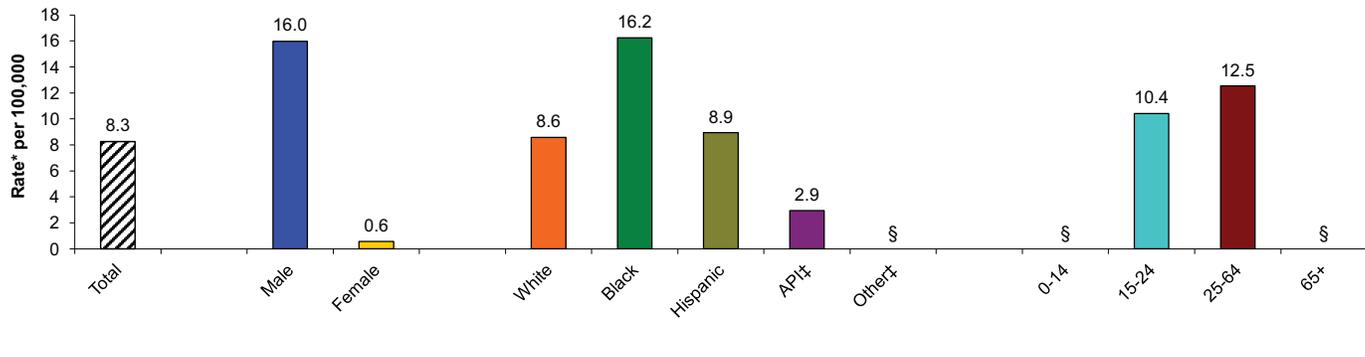
\* Rates per 100,000 population.  
 † Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Gonorrhea\* Incidence Among San Diego County Residents, 2009 Detail



\* Rates per 100,000 population.  
 † Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Primary and Secondary Syphilis\* Incidence Among San Diego County Residents, 2009 Detail

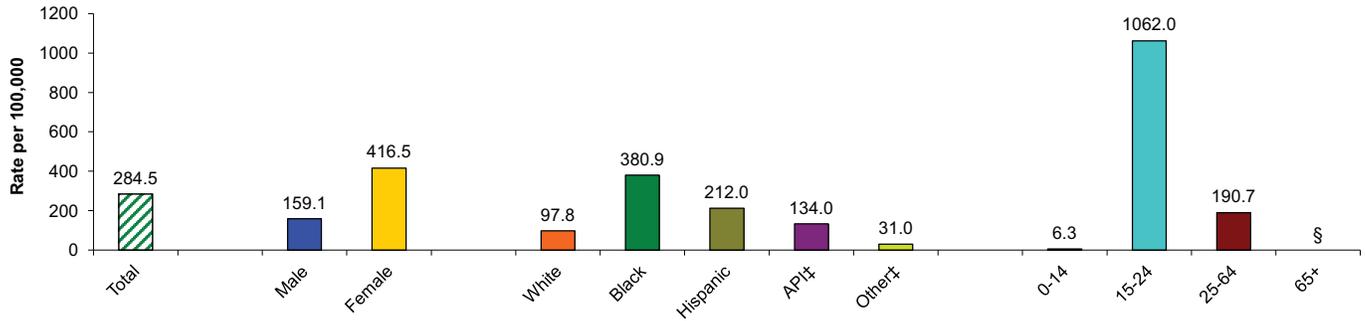


\* Rates per 100,000 population.  
 † Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown or outside San Diego County.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Sexually Transmitted Diseases (STDs) Details Graphs

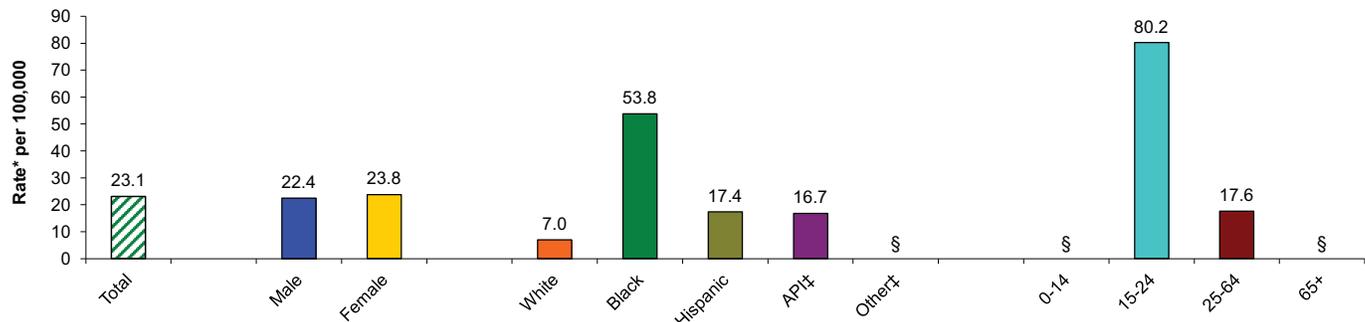
North Coastal Region

Chlamydia<sup>†</sup> Incidence Among San Diego County Residents - North Coastal Region, 2009 Detail



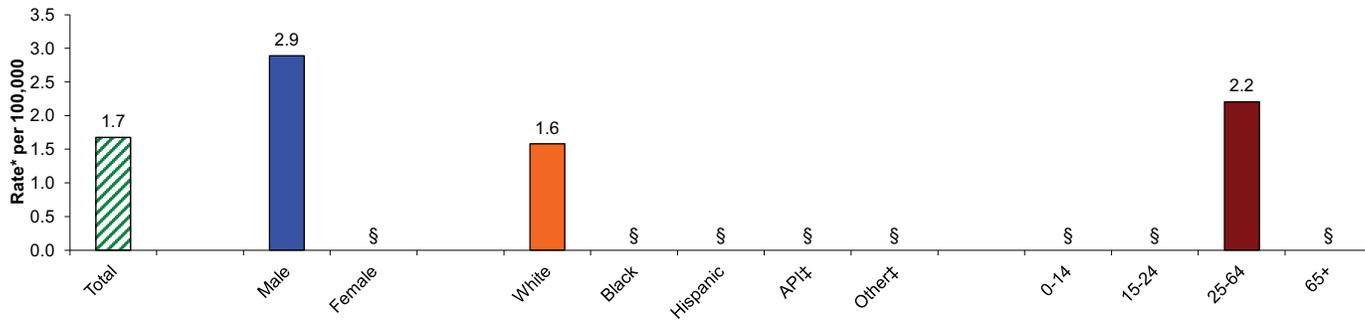
\* Rates per 100,000 population.  
 † Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

Gonorrhea<sup>†</sup> Incidence Among San Diego County Residents - North Coastal Region, 2009 Detail



\* Rates per 100,000 population.  
 † Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

Primary and Secondary Syphilis<sup>†</sup> Incidence Among San Diego County Residents - North Coastal Region, 2009 Detail

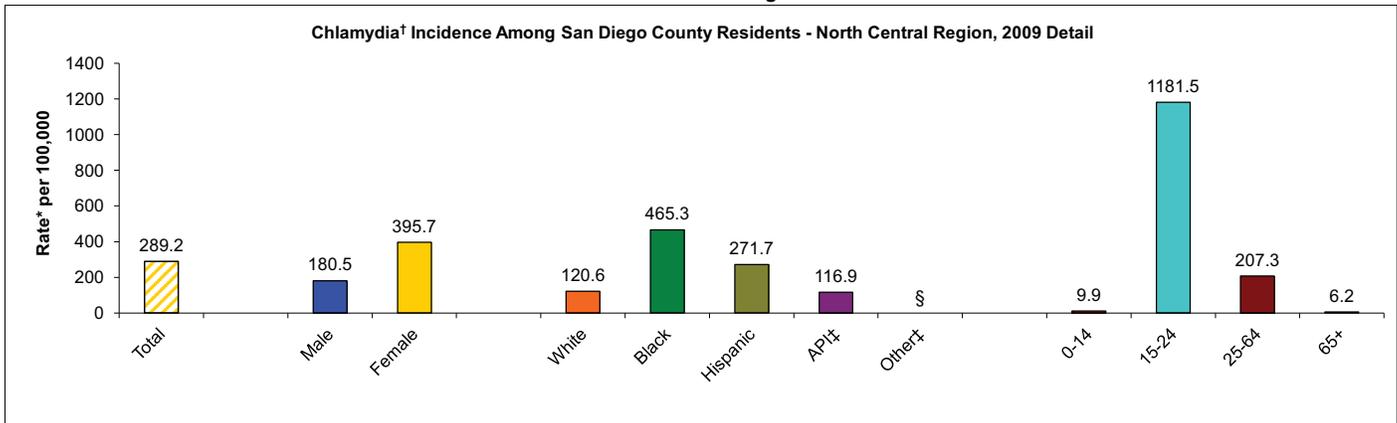


\* Rates per 100,000 population.  
 † Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown or outside San Diego County.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHS), Community Health Statistics, 01/12/2012.

Sexually Transmitted Diseases (STDs) Details Graphs

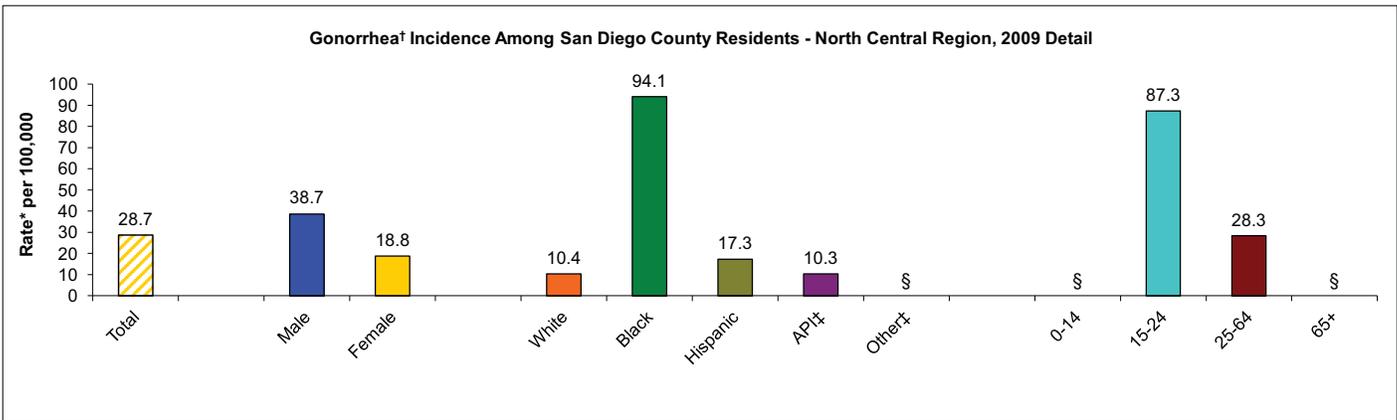
North Central Region

STD Reporting



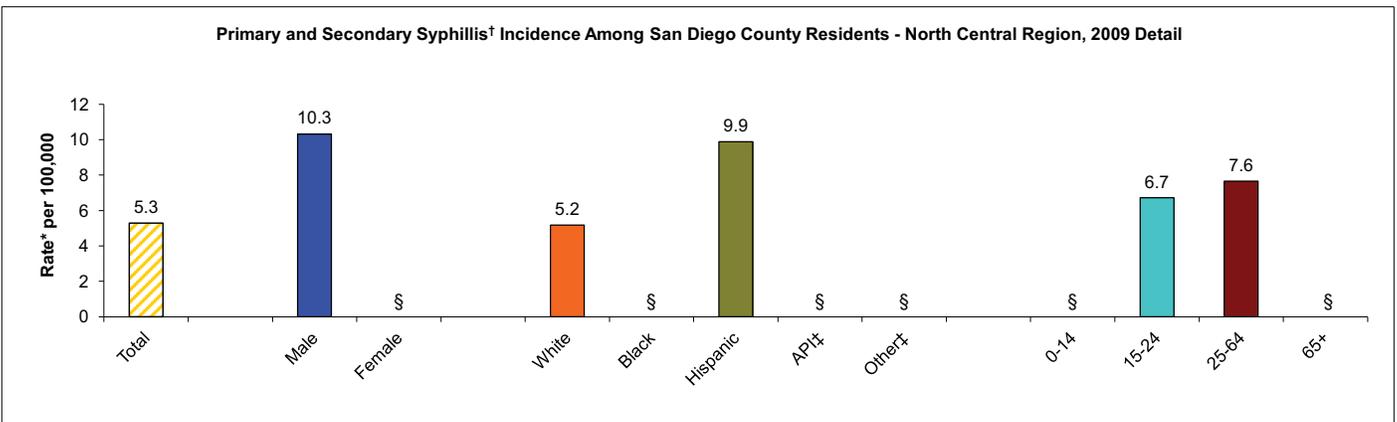
\* Rates per 100,000 population.  
 † Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

STD Reporting



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 † Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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STD Reporting



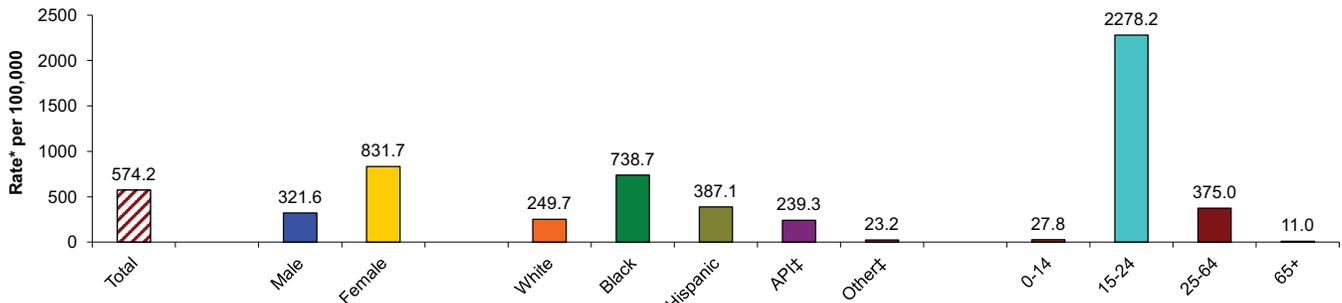
\* Rates per 100,000 population.  
 † Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
 § Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown or outside San Diego County.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Sexually Transmitted Diseases (STDs) Details Graphs

Central Region

STD Reporting

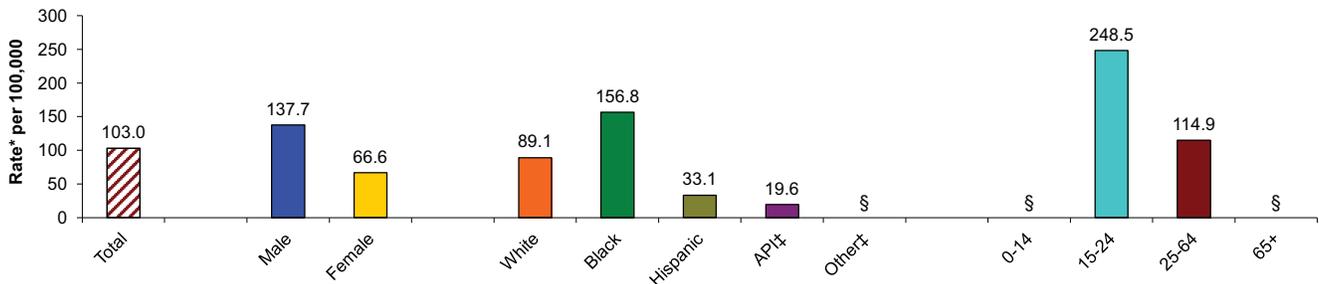
Chlamydia<sup>†</sup> incidence Among San Diego County Residents - Central Region, 2009 Detail



\* Rates per 100,000 population.  
 † Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
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 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

STD Reporting

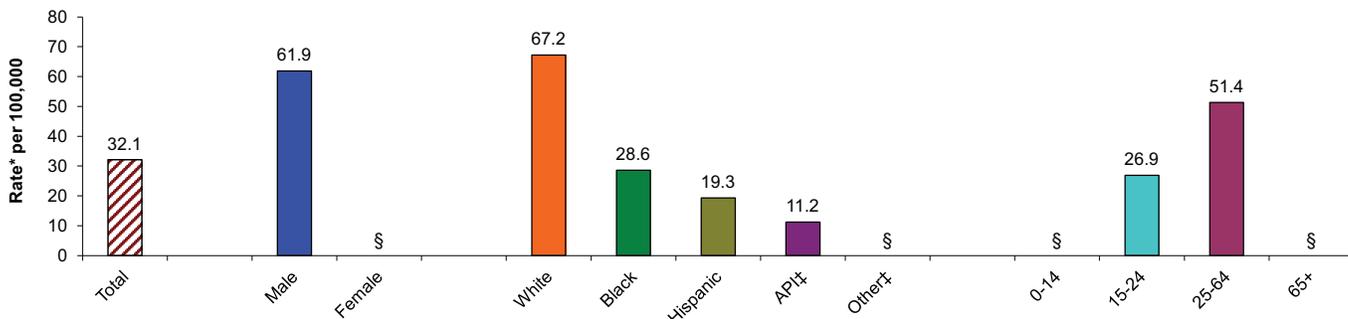
Gonorrhea<sup>†</sup> incidence Among San Diego County Residents - Central Region, 2009 Detail



\* Rates per 100,000 population.  
 † Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

STD Reporting

Primary and Secondary Syphilis<sup>†</sup> incidence Among San Diego County Residents - Central Region, 2009 Detail

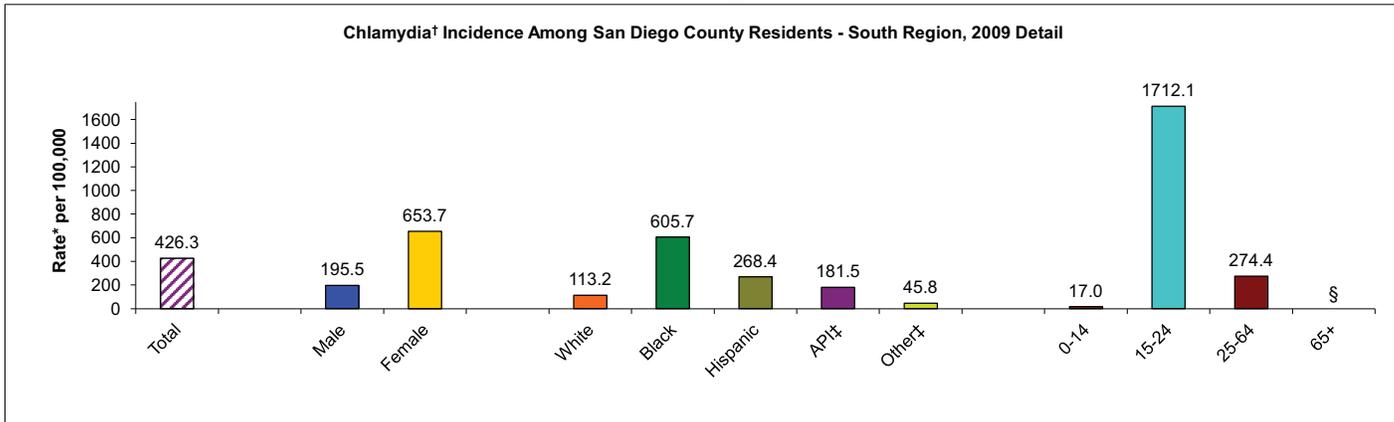


\* Rates per 100,000 population.  
 † Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
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Sexually Transmitted Diseases (STDs) Details Graphs

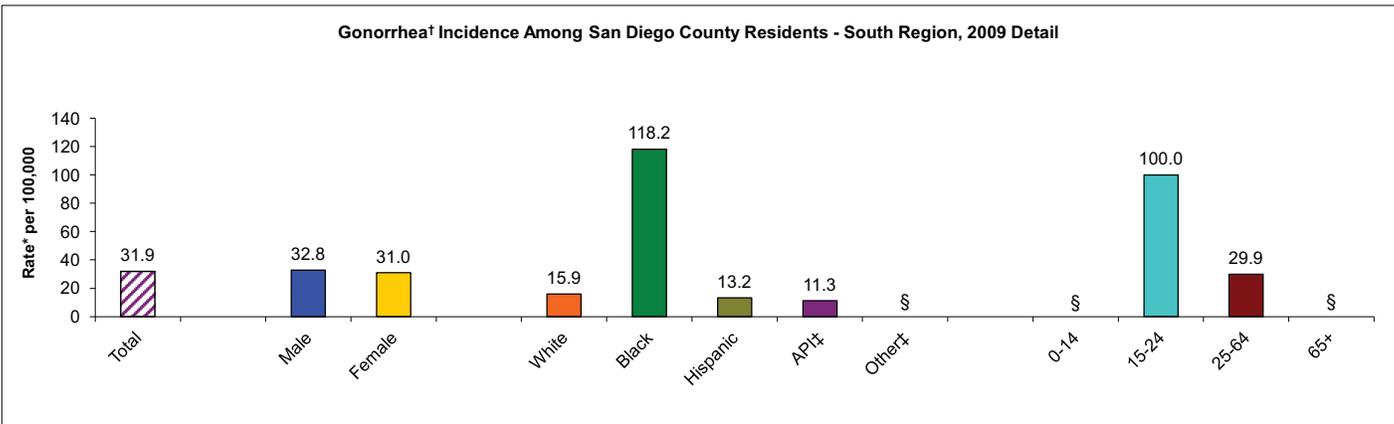
South Region

STD Reporting



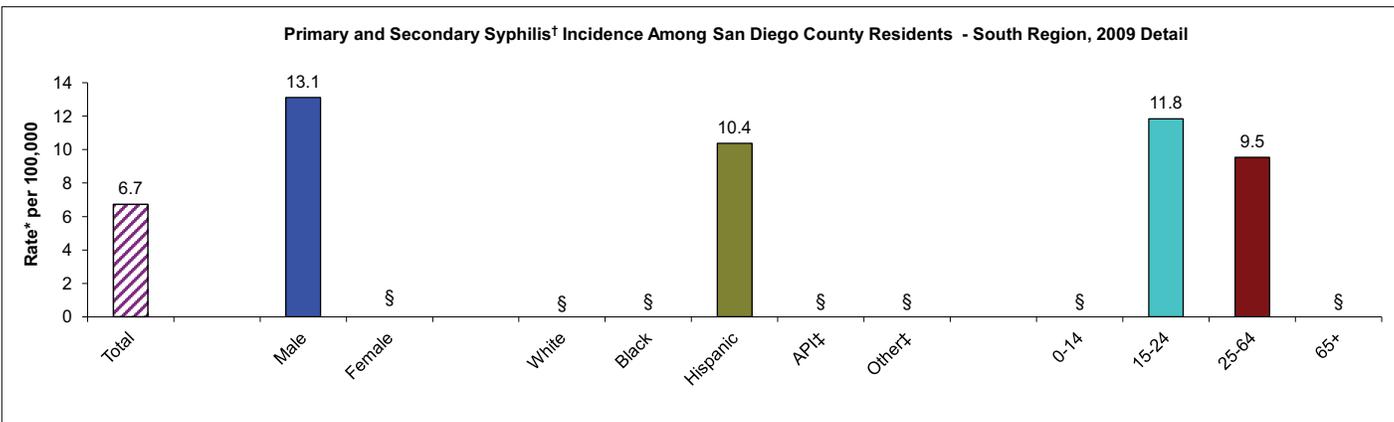
\* Rates per 100,000 population.  
<sup>†</sup> Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
<sup>‡</sup> API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
<sup>§</sup> Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.  
 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

STD Reporting



\* Rates per 100,000 population.  
<sup>†</sup> Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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STD Reporting

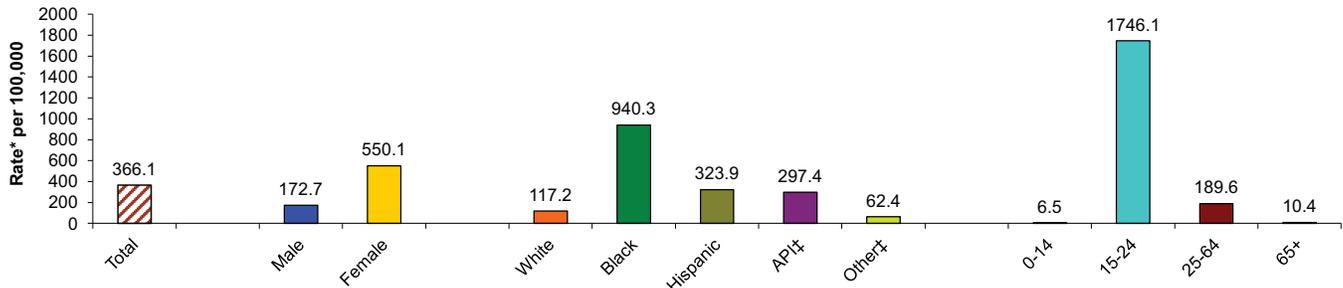


\* Rates per 100,000 population.  
<sup>†</sup> Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
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Sexually Transmitted Diseases (STDs) Details Graphs

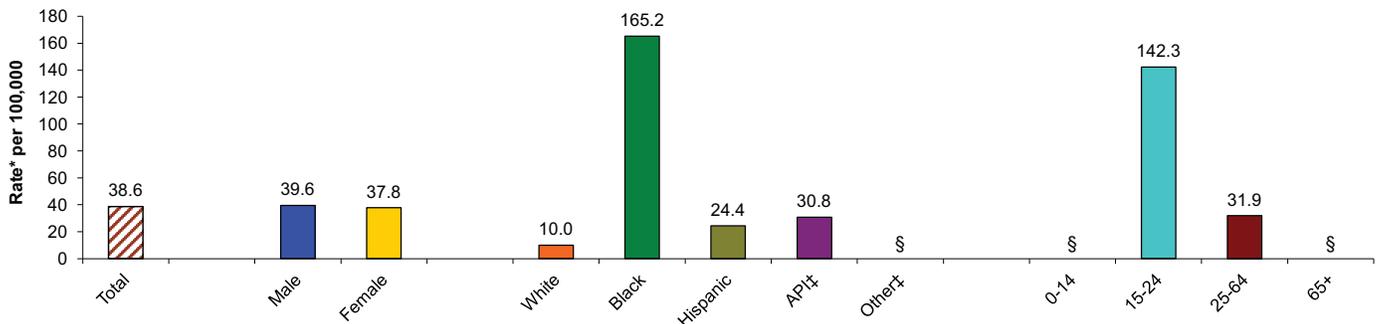
East Region

Chlamydia<sup>†</sup> Incidence Among San Diego County Residents - East Region, 2009 Detail



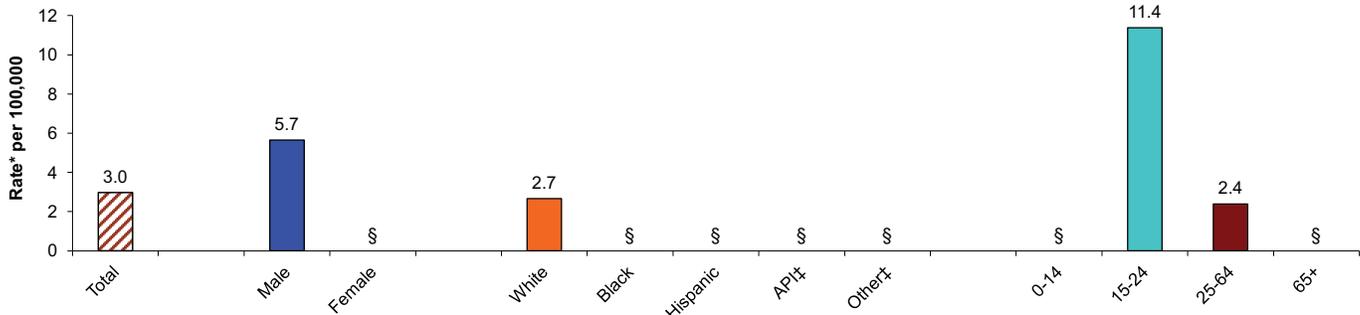
\* Rates per 100,000 population.  
 † Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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 Source: County of San Diego, Health & Human Services Agency, HIV, STD and Hepatitis Branch, Morbidity Database; SANDAG, Current Population Estimates, 10/2010.  
 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Gonorrhea<sup>†</sup> Incidence Among San Diego County Residents - East Region, 2009 Detail



\* Rates per 100,000 population.  
 † Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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 Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 01/12/2012.

Primary and Secondary Syphilis<sup>†</sup> Incidence Among San Diego County Residents - East Region, 2009 Detail

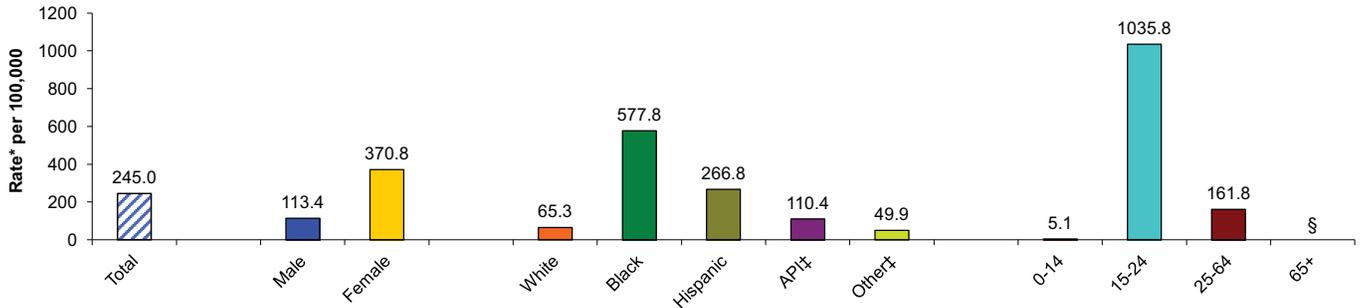


\* Rates per 100,000 population.  
 † Primary and Secondary Syphilis incidence refers to new cases reported to County Public Health Services.  
 ‡ API includes Asian, Pacific Islanders, Native Hawaiian. Other includes 2 or more races, Native American/Alaskan Native, American Indian, or other. Unknown not included.  
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Sexually Transmitted Diseases (STDs) Details Graphs

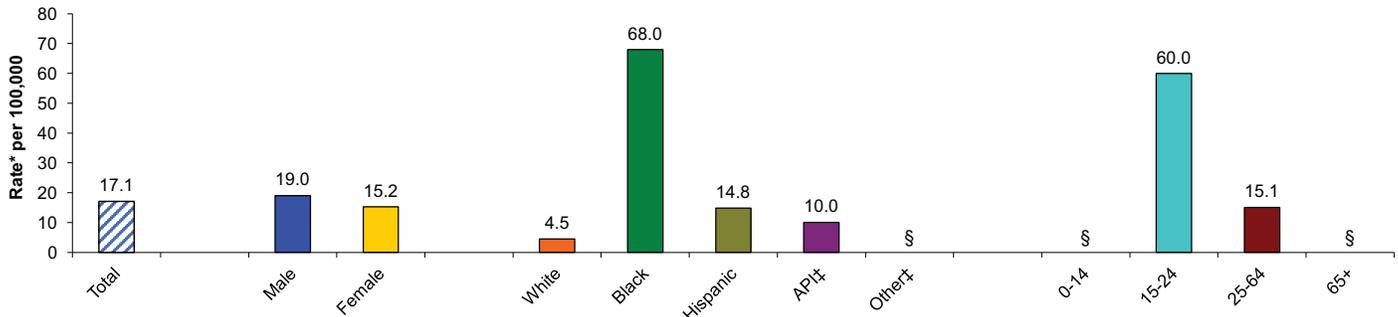
North Inland Region

Chlamydia<sup>†</sup> Incidence Among San Diego County Residents - North Inland Region, 2009 Detail



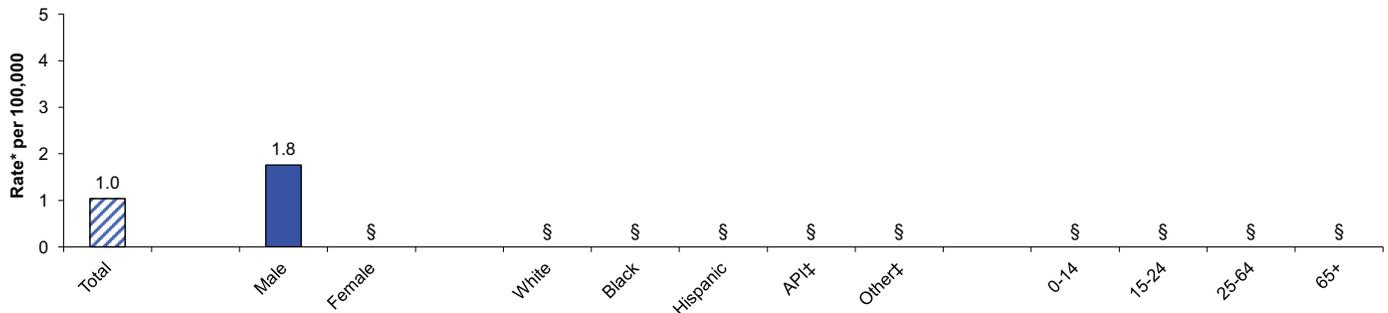
\* Rates per 100,000 population.  
<sup>†</sup> Chlamydia incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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Gonorrhea<sup>†</sup> Incidence Among San Diego County Residents - North Inland Region, 2009 Detail



\* Rates per 100,000 population.  
<sup>†</sup> Gonorrhea incidence refers to new cases reported to County Public Health Services. Note: due to cases with unknown residence, Regional numbers are underestimated.  
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Primary and Secondary Syphilis<sup>†</sup> Incidence Among San Diego County Residents - North Inland Region, 2009 Detail



\* Rates per 100,000 population.  
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***For more information, contact the  
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[www.SDHealthStatistics.com](http://www.SDHealthStatistics.com)